

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jul 06, 2001 08:00 AM****Secretary of State****DOCUMENT # 709551**1. Entity Name
SUNCOAST COMMUNITIES BLOOD BANK, INC.Principal Place of Business
1760 MOUND ST.
SARASOTA FL 34236
Mailing Address
1760 MOUND ST.
SARASOTA FL 342362. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0873275Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRENCH TED
1750 RINGLING BLVDSARASOTA FL
34236 US

7. Name and Address of New Registered Agent

Name
MARSHALL JANEStreet Address (P.O. Box Number is Not Acceptable)
1760 MOUND STREET

City SARASOTA FL Zip Code 34236

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE JANE MARSHALL

07/06/2001

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	34230	34230
VD	KNOWLES CHARLES	P O BOX 7 N/A	SARASOTA	FL	34230	<input type="checkbox"/> Delete
SD	WALLACE DAVID	P O BOX 3258 N/A	SARASOTA	FL	34230	<input type="checkbox"/> Delete
D	FERBER DAN	2210 SHADOW OAKS RD	SAASOTA	FL		<input type="checkbox"/> Delete
PD	TOALE JAMES	22 TUTTLE AVE STE #3	SARASOTA	FL	34237	<input type="checkbox"/> Delete
TD	WILLIAMS RICHARD J	1100 WESTWAY DR.	SARASOTA, FL	00000		<input type="checkbox"/> Delete
D	BUCK JAMES J	5207 HIDDEN HARBOR RD	SARASOTA	FL	34242	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	34230	34230	34239	34230	34237	34236	34242
D	WALLACE DAVID	P.O. BOX 3258	SARASOTA	FL	34230	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
SD	KUNZ JACK	3656 SAN REMO TERRACE	SARASOTA	FL	34239	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
PD	KNOWLES CHARLES	P.O. BOX 7	SARASOTA	FL	34230	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
PD	TOALE JAMES	22 TUTTLE AVE STE #3	SARASOTA	FL	34237	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
TD	MINTZER JOSEPH B	101 S. GULFSTREAM AVE.	SARASOTA,	FL	34236	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
VP	BUCK JAMES J	5207 HIDDEN HARBOR RD	SARASOTA	FL	34242	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH B. MINTZER

TD

07/06/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)