

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H59358

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** SUNCOAST CONTRACTORS SUPPLY, INC.

**Current Principal Place of Business:**

3160 KUTAK RD  
FT. MYERS, FL 33916

**New Principal Place of Business:**

3160 KUTAK RD  
FT. MYERS, FL 33916 US

**Current Mailing Address:**

3160 KUTAK RD  
FT. MYERS, FL 33916

**New Mailing Address:**

3160 KUTAK RD  
FT. MYERS, FL 33916 US

**FEI Number:** 59-2536678

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURDETTE, WILLIAM P PRES  
15291 SAM SNEAD LANE  
N. FT. MYERS, FL 33917 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BURDETTE, WILLIAM P  
Address: 15291 SAM SNEAD LANE  
City-St-Zip: N. FT. MYERS, FL 33917

Title: DV  
Name: MOORE, LANNY W., JR  
Address: 8451 CASA DEL RIO LN  
City-St-Zip: FT. MYERS, FL 33919

Title: DST  
Name: MOORE, LANNY W., JR.  
Address: 8451 CASA DEL RIO LN  
City-St-Zip: FT. MYERS, FL 33919

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM P. BURDETTE

PRES

04/08/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date