

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008945

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** SUN COAST CATHOLIC MINISTRIES INC.

**Current Principal Place of Business:**

2209 COLLIER PARKWAY  
SUITE 287  
LAND O'LAKES, FL 34639

**New Principal Place of Business:**

**Current Mailing Address:**

2209 COLLIER PARKWAY  
SUITE 287  
LAND O'LAKES, FL 34639

**New Mailing Address:**

FEI Number: 80-0650571

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOBEV, DIMITRE  
2209 COLLIER PARKWAY  
SUITE 287  
LAND O'LAKES, FL 34639 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: DIR  
Name: SERPENTI, RON  
Address: 2209 COLLIER PARKWAY, SUITE 287  
City-St-Zip: LAND O'LAKES, FL 34639

Title: DIR  
Name: JOAQUIN, JEFF  
Address: 2209 COLLIER PARKWAY, SUITE 287  
City-St-Zip: LAND O'LAKES, FL 34639

Title: DIR  
Name: GARDNER, JIM  
Address: 2209 COLLIER PARKWAY, SUITE 287  
City-St-Zip: LAND O'LAKES, FL 34639

Title: DIR  
Name: BOBEV, DIMITRE  
Address: 2209 COLLIER PARKWAY, SUITE 287  
City-St-Zip: LAND O'LAKES, FL 34639

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DIMITRE BOBEV

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04/21/2011

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

\_\_\_\_\_  
Date