2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35688

FILED Apr 11, 2007 Secretary of State

Entity Name: SUNCOAST CLASSIC JAZZ, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:		
PO BOX 1945 LARGO, FL 337781945 US				7602 DARTMOUTH AVE N ST. PETERSBURG, FL 33710 US		
Current Mailing Address:			New Mailing Addre	New Mailing Address:		
PO BOX 1 LARGO, F	1945 FL 337791945 US					
El Numbe	r: 59-2986002 FEI Number	Applied For () FEI N	Number Not Applicable()	Certificate of Status Desired ()		
Name an	d Address of Current Regi	stered Agent:	Name and Address	of New Registered Agent:		
7602 DAF	S, DAVID S RTMOUTH AVE N ETERSBURG, FL 33710	US				
	e named entity submits this s te of Florida.	statement for the purpose	e of changing its register	ed office or registered agent, or both,		
SIGNATU	IRF.					
21014/110	· · · · · ·					
313117113	Electronic Signature	of Registered Agent		Date		
		of Registered Agent	ADDITIONS/CHANG			
OFFICER Fitle: Name: Address:	Electronic Signature		ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	Date BES TO OFFICERS AND DIRECTORS () Change () Addition		
OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	Electronic Signature RS AND DIRECTORS: D () Delete FANNING, DAVID 7602 DARTMOUTH AVE N	10	Title: Name: Address:	SES TO OFFICERS AND DIRECTORS		
	Electronic Signature RS AND DIRECTORS: D () Delete FANNING, DAVID 7602 DARTMOUTH AVE N SAINT PETERSBURG, FL 337 D () Delete DOMBER, MAT 2189 CLEVELAND STREET, #	10	Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition		
DFFICER Title: Name: Nddress: Dity-St-Zip: Title: Name: Nddress: Dity-St-Zip: Title: Name: Nddress: Nddress:	Electronic Signature RS AND DIRECTORS: D () Delete FANNING, DAVID 7602 DARTMOUTH AVE N SAINT PETERSBURG, FL 337 D () Delete DOMBER, MAT 2189 CLEVELAND STREET, #: CLEARWATER, FL 33765 D () Delete KELLY, MAXINE 10265 ULMERTON RD.	10	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

	SIGNATURE: DAVID A. FANING/DIRECTOR	MR.	04/11/2007
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