

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35688

FILED
Mar 21, 2008
Secretary of State

Entity Name: SUNCOAST CLASSIC JAZZ, INC.

Current Principal Place of Business:

7602 DARTMOUTH AVE N
ST. PETERSBURG, FL 33710 US

New Principal Place of Business:

1100 S. BELCHER RD.
#732
ST. PETERSBURG, FL 33771 US

Current Mailing Address:

PO BOX 1945
LARGO, FL 337791945 US

New Mailing Address:

FEI Number: 59-2986002 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FANNING, DAVID S
7602 DARTMOUTH AVE N
SAINT PETERSBURG, FL 33710 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: D () Delete
Name: FANNING, DAVID
Address: 7602 DARTMOUTH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: D () Delete
Name: DOMBER, MAT
Address: 2189 CLEVELAND STREET, #225
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: KELLY, MAXINE
Address: 10265 ULMERTON RD.
City-St-Zip: LARGO, FL

Title: D () Delete
Name: JACOBS, CHARLIE
Address: 1867 BRENTWOOD DR
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: WIMPFEN, SHIRLEY
Address: 1915 58TH ST SOUTH
City-St-Zip: GULF PORT, FL 33707

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MS () Change (X) Addition
Name: DRAGON, JOAN
Address: 1100 S. BELCHER RD., #732
City-St-Zip: LARGO, FL 33771

I hereby certify that the information supplied with this filing does not qualify 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: SHIRLEY A. WIMPFEN

D

03/21/2008

Electronic Signature of Signing Officer or Director

Date