

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004876

FILED
Apr 30, 2008
Secretary of State

Entity Name: SUNCOAST WHEELCHAIR ATHLETIC ASSOCIATION, INC.

Current Principal Place of Business:

5593 CEDAR OAK BLVD.
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

5593 CEDAR OAK BLVD.
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 65-0602556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WETHERINGTON, BILLY
2250 GULF GATE DRIVE
SUITE C
SARASOTA, FL 34231 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: PD () Delete
Name: HOOPER, ED
Address: 5593 CEDAR OAK BLVD.
City-St-Zip: SARASOTA, FL 34233

Title: TD () Delete
Name: O'CONNOR, PATRICK
Address: 6110 PINE TREE DR
City-St-Zip: BRADENTON, FL 34202

Title: SD () Delete
Name: WETHERINGTON, BILLY
Address: 677 N WASHINGTON # 39
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: DAWKINS, DON
Address: 2300 FAIRFIELD AVE.
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: STARK, JUSTIN
Address: 11095 AUBURNDAL STREET
City-St-Zip: SPRING HILL, FL 34609

Title: D () Delete
Name: CERUTI, DAVE
Address: 27548 WEKIVA LANE
City-St-Zip: WESLEY CHAPEL, FL 33543

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: D (X) Change () Addition
Name: WHITEHEAD, MIKE
Address: 13720 18TH PLACE EAST 34212
City-St-Zip: BRADENTON FL, FL 34212

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: ED HOOPER

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date