

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2004
Secretary of State**

DOCUMENT# N98000004460

Entity Name: SUNCOAST SCHOOL FOR INNOVATIVE STUDIES, INC.

Current Principal Place of Business:

2033 MAIN STREET #101
SUITE 600
SARASOTA, FL 34237

New Principal Place of Business:

1300 SOUTH TUTTLE AVENUE
SARASOTA, FL 34239

Current Mailing Address:

2033 MAIN STREET #101
SUITE 600
SARASOTA, FL 34237

New Mailing Address:

1300 SOUTH TUTTLE AVENUE
SARASOTA, FL 34239

FEI Number: 65-0854393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

J. GEOFFREY PFLUGNER
2033 MAIN STREET
SUITE 600
SARASOTA, FL 34237

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: MESSINA, LAURIE
Address: 2332 ARDEN DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: KIRCHNER, JAN
Address: 1315 LANDINGS DR.
City-St-Zip: SARASOTA, FL 34231

Title: SD () Delete
Name: SUCZEWSKI, DIANE
Address: 1955 ROLLING GREEN
City-St-Zip: SARASOTA, FL 34246

Title: TD () Delete
Name: BERNSTEIN, SUSAN
Address: 5591 SIESTA ESTATES CT.
City-St-Zip: SARASOTA, FL 34242

Title: D () Delete
Name: FROMMHOLZ, PHIL
Address: 4851 OAK POINTE WAY
City-St-Zip: SARASOTA, FL 34233

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANE SUCZEWSKI

SD

04/30/2004

Electronic Signature of Signing Officer or Director

Date