

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 22, 2009  
Secretary of State**

DOCUMENT# N98000004460

Entity Name: SUNCOAST SCHOOL FOR INNOVATIVE STUDIES, INC.

**Current Principal Place of Business:**

1300 SOUTH TUTTLE AVENUE  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

1300 SOUTH TUTTLE AVENUE  
SARASOTA, FL 34239

**New Mailing Address:**

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 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: JODHAN, NICHOLAS  
Address: 7342 FEATHERSTONE BLVD  
City-St-Zip: SARASOTA, FL 34238

Title: VD ( ) Delete  
Name: SMESLER, PHILLIP  
Address: 873 SIMMONS AVE  
City-St-Zip: SARASOTA, FL 34232

Title: SD ( ) Delete  
Name: CONWAY, CYNTHIA  
Address: 1260 FIFTH ST  
City-St-Zip: SARASOTA, FL 34235

Title: TD ( ) Delete  
Name: PATTERSON, LINDA  
Address: 5732 WHISTLEWOOD CIRCLE  
City-St-Zip: SARASOTA, FL 34232

**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:

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: LINDA PATTERSON

TRES

04/22/2009

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

\_\_\_\_\_  
Date