

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000007479

FILED
Mar 30, 2009
Secretary of State

Entity Name: SUNCOAST PORTABLE SANITATION, INC.

Current Principal Place of Business:

8999 HIGH COTTON LANE
SUITE 3
FORT MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

3442 FRANCIS ROAD
SUITE 220
ALPHARETTA, GA 30004

New Mailing Address:

FEI Number: 20-4186602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH LTD INC
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DEVOTO, W. WESLEY
Address: 3442 FRANCIS ROAD, SUITE 220
City-St-Zip: ALPHARETTA, GA 30004

Title: D () Delete
Name: POWELL, ALEX
Address: 3442 FRANCIS ROAD, SUITE 220
City-St-Zip: ALPHARETTA, GA 30004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEX POWELL

D

03/30/2009

Electronic Signature of Signing Officer or Director

Date