

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717951

**Entity Name:** SUNCOAST ANTIQUE BOTTLE COLLECTOR'S ASSOCIATION, INC.**FILED**  
**May 09, 2016**  
**Secretary of State**  
**CC4921076251****Current Principal Place of Business:**5800-15TH AVE.SO.  
ST PETERSBURG, FL 33707**Current Mailing Address:**12451-94TH AVE.N.  
SEMINOLE, FL 33772 US**FEI Number: 23-7347061****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**DUEBEN, GUSTAV G., III  
12451 - 94TH AVENUE NORTH  
SEMINOLE, FL 33772 US*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**Officer/Director Detail :**

Title	PD
Name	KING, RICHARD
Address	15930 KING'S PARKWAY
City-State-Zip:	TAMPA FL 33618

Title	VD
Name	SANDERS, DALE
Address	7905OLLEY RD
City-State-Zip:	ODESSA FL 33556

Title	SD
Name	BUTTSTEAD, LINDA
Address	8720 - 36 AVE EAST
City-State-Zip:	PALMETTO FL 34221

Title	TD
Name	DUEBEN, GEORGE
Address	12451 - 94TH AVE., N
City-State-Zip:	SEMINOLE FL 33772

Title	D
Name	BUTTSTEAD, BILL
Address	8720-36TH AVE.EAST
City-State-Zip:	PALMETTO FL 34221

Title	D
Name	HOUSTON, PERRY
Address	3910 MEADOW CREEK DR.
City-State-Zip:	SARASOTA FL 34233

*I hereby 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 all other like empowered.*

**SIGNATURE: GUSTAV G DUEBEN LLL****REGISTERED AGENT****05/09/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date