

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770505

Entity Name: NORTH SUNCOAST ESTATE PLANNING COUNCIL, INC.**Current Principal Place of Business:**2509 CHEVAL DR.
HOLIDAY, FL 34690**Current Mailing Address:**2509 CHEVAL DR.
HOLIDAY, FL 34690 US**FEI Number: 59-2025998****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAY, MICHAEL V
2509 CHEVAL DR.
HOLIDAY, FL 34690 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	TD
Name	MAY, MICHAEL V
Address	2509 CHEVAL DR
City-State-Zip:	HOLIDAY FL 34690

Title	PD
Name	PETERS, MIKE
Address	11315 LITTLE RD
City-State-Zip:	NEW PORT RICHEY FL 34654

Title	SD
Name	GANGEMI, LINDA J
Address	11031 U S HIGHWAY 19
City-State-Zip:	PORT RICHEY FL 34668

Title	VPD
Name	BREEN, CAROLINE W
Address	3709 WEST JETTON AVE
City-State-Zip:	TAMPA FL 33629

Title	D
Name	BELL, REBECCA C
Address	7920 U.S. HIGHWAY 19
City-State-Zip:	PORT RICHEY FL 34668

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: MICHAEL V MAY**TREASURER****04/17/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date