

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008366

Entity Name: VENEZUELAN SUNCOAST ASSOCIATION, INC.**Current Principal Place of Business:**4119 WOODLARK DR
TAMPA, FL 33624**Current Mailing Address:**P.O.BOX 23565
TAMPA, FL 33623**FEI Number:** 59-3608282**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MONIPATRY, SANCHEZ
4119 WOODLARK DR.
TAMPA, FL 33624 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	SECRETARY
Name	SILVA, VICTOR
Address	5855 18TH ST N. APT 2
City-State-Zip:	ST PETERSBURG FL 33714

Title	TREA
Name	SANCHEZ, MONIPATRY
Address	4119 WOODLARK DRIVE
City-State-Zip:	TAMPA FL 33624

Title	VP
Name	TORRES, JAVIER SR.
Address	PO BOX 271227
City-State-Zip:	TAMPA FL 33688

Title	PRESIDENT
Name	PERDOMO, SUSANA
Address	4201 PINE ISLE DR
City-State-Zip:	LUTZ FL 33558
Title	DIRECTOR, COMMUNICATIONS
Name	ABREU, SILVIA
Address	ODESSA, FL
City-State-Zip:	ODESSA FL

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: MONIPATRY SANCHEZ**TREASURER****05/05/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date