

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 267621

**FILED**  
**Jan 22, 2009**  
**Secretary of State****Entity Name:** SUNCOAST PRECISION TOOLS, INC.**Current Principal Place of Business:**10360 72ND STREET NORTH  
UNIT #809  
LARGO, FL 33777**New Principal Place of Business:****Current Mailing Address:**10360 72ND STREET NORTH  
UNIT #809  
LARGO, FL 33777**New Mailing Address:****FEI Number:** 59-2126367**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SHEEN, MILTON R IV  
4022 PORTSMOUTH ROAD  
LARGO, FL 33771 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:** CPD ( ) Delete  
**Name:** SHEEN, MILTON R IV  
**Address:** 4022 PORTSMOUTH ROAD  
**City-St-Zip:** LARGO, FL 33771**Title:** VPD (X) Delete  
**Name:** NICCUM, BRADLEY S  
**Address:** 5528 PINE STREET  
**City-St-Zip:** TANGERINE, FL 32777**Title:** VPD ( ) Delete  
**Name:** BRENT, WINNER R  
**Address:** 1106 MICHIGAN DRIVE NORTH  
**City-St-Zip:** DUNEDIN, FL 34698**Title:** S ( ) Delete  
**Name:** SANDRA, BROWN H  
**Address:** 2058 VALENCIA WAY  
**City-St-Zip:** CLEARWATER, FL 33764**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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MILTON R SHEEN IV

CPD

01/22/2009

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