Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90083 042 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 450417

1. Corporation							
SUNCOAST REALTY MANAGEMENT COMPANY, INC.							
					i	DY a n ana n aram 1	ARN 81011 (88)
Í							
Principal Place of Business Mailing Address						91844 B)E11 B1644 Y	HEI1 41811 1881
3711 CORTEZ RD W 3711 CORTEZ RD W							
STE 300 STE 300							
BRADENTON FL 34210 BRADENTON FL 34210					DO NOT WRITE IN THIS SPACE		
us us					3. Date Incorporated or Qualifed		
					04/16/1974		
,	Principal Place of Business Za. Mailing Address				4. FEI Number	<u> </u>	plied For
21 26					59-1535171		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A	
22 27							· —
City & State	City & State City & State				6. Election Campaign Financing	\$5.00	
23	28				Trust Fund Contribution	Added_t	o Fees
Zip			_ Country		8. This corporation owes the current year In		□No
24	25 29 30		0		Personal Property Tax.	Xes	LINO
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
OLG.	ON ANN M		81	Name			
OLSON, ANN M.			82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
3711 CORTEZ RD W S300							
	DENTON FL 34210		83	1			
DHA	DENTUN PL 34210		84	City		85 Zip	Code
				*	<u></u>	_	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abov	e-named corpo	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	f changing its	registered
office or n	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was autions of, Section 607.0505, Florid	norized by da Statutes	tne corporation	n's board of directors, i hereby accept the appo	iliment as to	gistered
		,					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required to							
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	SD	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME			1.2 NAME		·		
STREET ADDRESS			1.3 STREE	T ADDRESS			
CITY-ST-ZIP			1.4 CITY-S	T- ZIP			
TITLE	VAS	DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	Bartley, John	, ,	2.2 NAME				
STREET ADDRESS	2744 CODTEZ PD W		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	BRADENTON FL 2.4		·2. 4 C/TY-5	ST-ZIP	·	,	
TITLE	PTD	☐ DELETE	3.1 TITLE		•	Change	Addition
NAME	SCHIER, JAMES R.		3.2 NAME				
STREET ADDRESS	3711 CORTEZ RD \$300		3.3 STREET ADDRESS				
CITY-ST-ZIP	BRADENTON FL	. 3.4.		ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	□ Addition
NAME	•		4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP		1		1		•	
TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
			5.3 STREE	TADDRESS			
STREET ADDRESS	ADDRESS		5.4 CITY- S				
TITLE		☐ DELETE	6.1 TITLE	-		☐ Change	Addition
1							
NAME -		_ better	6.2 NAME				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP " .

JSJGNWTUDZOZZQUIREIANN M. OLSON

941-756-0677