

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **493353** (7)

1. Corporation Name  
**SUN COAST POST CARDS & PRODUCTS AGENCY, INC.**



Principal Place of Business: **596 N. INDIAN ROCK RD #A11  
PO BOX 1376 LARGO, FL (34649)  
LARGO FL 34649-8376**

Mailing Address: **596 N. INDIAN ROCK RD #A11  
PO BOX 1376 LARGO, FL (34649)  
LARGO FL 34649  
US**

3. Date Incorporated or Qualified: **12/31/1975**

3a. Date of Last Report: **04/27/1995**

4. FEI Number: **59-1638251**

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **21 13071B 92nd Street N.**

Suite, Apt. #, etc.: **22 UNIT # 504B**

City & State: **23 LARGO, FL.**

Zip: **24 34643** Country: **25 US**

Mailing Address: **26 PO Box 1376**

Suite, Apt. #, etc.: **27**

City & State: **28 LARGO, FL.**

Zip: **29 34649** Country: **30 US**

9. Name and Address of Current Registered Agent

**CONSIDINE, EDWARD J.  
610 EDGEWATER DR APT. 8  
DUNEDIN FL 34698**

10. Name and Address of New Registered Agent

**81 Name Edward J. Considine Jr**

**82 Street Address (P.O. Box Number is Not Acceptable) 12124 144TH LANE**

**83**

**84 City LARGO FL 85 Zip Code 34644-3356**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Edward J. Considine Jr.* **Edward J. Considine Jr.** **4-27-1996**

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	CONSIDINE, EDWARD J JR	
STREET ADDRESS	596 N INDIAN ROCKS A11	
CITY-ST-ZIP	BELLAIR BLUFFS FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	CONSIDINE, JOHN	
STREET ADDRESS	PO BOX 1376 N/A	
CITY-ST-ZIP	LARGO FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	CONSIDINE, EDWARD J, JR	
13 STREET ADDRESS	12124 144TH LANE	
14 CITY-ST-ZIP	LARGO, FL, 34644-3356	
21 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Edward J. Considine III	
23 STREET ADDRESS	PO BOX 1376 N/A	
24 CITY-ST-ZIP	LARGO FL 34649-1376	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE	200001858842	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	-06/04/96 -01106--009	
53 STREET ADDRESS	***200.00	
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Edward J. Considine Jr.* **Edward J. Considine Jr** **President** **4-27-96** **1-813-580-6000**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

3/11/96