2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704102

FILED Jan 29, 2009 Secretary of State

Entity Name: SUNCOAST BAPTIST ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 6559 126TH AVENUE N. LARGO, FL 33773 **Current Mailing Address: New Mailing Address:** 6559 126TH AVE. N. LARGO, FL 33773 US FEI Number: 59-0975654 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KLINE, NANCY 6559 126TH AVE N LARGO, FL 33773 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition KLINE, WILLIAM HOLLEY, DONNIE Name: Name: 6559 126TH AVE N Address: 6559 126TH AVE N Address: City-St-Zip: LARGO, FL 33773 City-St-Zip: LARGO, FL 33773 Title: Title: () Delete () Change () Addition Name: MCWILSON, ERVIN Name: Address: 6559 126TH AVEN N Address: City-St-Zip: LARGO, FL 33773 City-St-Zip: Title: () Delete Title: () Change () Addition WETZEL, MICHAEL Name: Name: Address: 1271 PINELLAS BAYWAY Address: City-St-Zip: TIERRA VERDE, FL 33715 City-St-Zip: () Delete Title: Title: () Change () Addition Name: KANE, KEVIN Name: Address: 1818 29TH AVE N Address: ST PETERSBURG, FL 33704 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition ROBERT, CHRISTIE Name: Name: 2985 61ST STREET S Address: Address: City-St-Zip: ST PETERSBURG, FL 33712 City-St-Zip: Title: () Delete Title: () Change () Addition SANDERS, GUY Name: Name: Address: 6561 CIRCLE BLVD Address: NEW PORT RICHEY, FL 34652 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERVIN MCWILSON DIR 01/29/2009