2004 NOT-FOR-PROFIT CORPORATION

AMENDED ANNUAL REPORT					SECR	FILED FTARY OF ATION	
DOCUI 1. Entity Nam SUNCOA INC., OF			DIVISIO) O4 SE	FILED ETARY OF STATE OF CORPORATION P 24 AM 18:00	NS:		
Principal Place of Business 2300 62ND AVE N ST PETESBURG, FL 33702 US		Mailing Address 2300 62ND AVE N ST PETESBURG, FL 33702 US			'	: AIRE AIRE AIRE AIRE AIRE	I I 1 16 1
2. Principal Place of Business		3. Mailing Address					IIIÍ
Suite, Apt. #, etc.		Suite, Apt, #, etc.			09072004 Chg-NP	CR2E037 (10/03)	120
City & State		City & State			4. FEI Number 59-1235472		ed For pplicable
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Addition	onal (\$10)
TAMPA, FI	ENRY AVE _ 33614		Street Addre		ve Knellinger O. Box Number is Not Acceptable 18 33rd Ave Pete.	FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed named registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) PATE 9. Election Campaign Financing Trust Fund Contribution.							
10	OFFICERS AND DIR	ECTORS	11.	. A	DDITIONS/CHANGES TO OFFICE)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LETT, E D 2300 62ND AVE N ST PETERSBURG, FL 33702	© Poelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	230	rell , D.J. o 62nd Ave. N. Petersburg FL	© ∕change [33702.	Addilion
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSD AGNEW, DOUGLAS 7015 BAYOU WEST PL PINELLAS PARK, FL 33782	№ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSD	y Kessie 18 84th Way N.	∏⊿ Change I	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURRAY, BRENT 4036 37TH AVENUE NORTH ST. PETERSBURG, FL. 33713	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		30004.1 	443字字。 O006 **70.0	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL, GARY 11860 LAKE ALLEN DR. LARGO, FL 33773	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	138	Crawford 14th Ave. N. Pote., FL 33701		Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	۸.	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
12. I hereby indicated of the corchanged	certify that the information supplied with on this report or supplemental report is poration or the receiver of trustee emp- or on an attachment with an actions.	this filing does not qualify for the true and accurate and that my wered to execute this report as with all other like empowered.	ne exemption stat signature shall h required by Cha	ted in Sec ave the s apter 617	ction 119.07(3)(i), Florida Statutes. ame legal effect as if made under Florida Statutes; and that my nan	I further certify that the info oath; that I am an officer or ne appears in Block 10 or Bl	rmation director lock 11 if