## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#723282** 

FILED Jan 07, 2008 Secretary of State

Entity Name: SUNCOAST YOUNG PEOPLE'S THEATRE, INC

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	AND BOULEVA RT RICHEY, FL				
Current N	/lailing Addres	ss:	New Mailing Addres	ss:	
P.O. BOX NEWPOR	188 RT RICHEY, FL	346560188			
FEI Number	r: 59-1406158	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:	
NEW POF	ND BLVD RT RICHEY, Fl				
in the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both	
	e of Florida.			ed office or registered agent, or both	
SIGNATU	e of Florida.  RE: Electroi	nic Signature of Registered Ag	ent	Date	
SIGNATU	e of Florida.	nic Signature of Registered Ag	ent		
SIGNATU  OFFICER  Title: Name: Address:	Electron  S AND DIRECT  PD ( SKELTON, CH. 6237 GRAND B	nic Signature of Registered Ag TORS: ) Delete ARLES	ent	Date	
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron  S AND DIRECT  PD ( SKELTON, CH. 6237 GRAND E NEW PORT RI  VPD ( SCHUER, ALM 6237 GRAND E	nic Signature of Registered Age FTORS:  ) Delete ARLES BLVD CHEY, FL 34652  ) Delete	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO	
SIGNATU	E of Florida.  RE: Electron  S AND DIREC  PD ( SKELTON, CH. 6237 GRAND E NEW PORT RI  VPD ( SCHUER, ALM 6237 GRAND E NEW PORT RI	nic Signature of Registered Age FTORS:  ) Delete ARLES BLVD CHEY, FL 34652  ) Delete AR BLVD CHEY, FL 34652  ) Delete OHEY, FL 34652	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO () Change () Addition	

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: CHARLES SKELTON PD 01/07/2008