

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 723374

1. Entity Name
SUNCOAST SEABIRD SANCTUARY, INC.



Principal Place of Business
**18323 SUNSET BLVD
REDINGTON SHORES, FL 33708**

Mailing Address
**18323 SUNSET BLVD
REDINGTON SHORES, FL 33708**

FILED
Jul 11, 2008 08:00 AM
Secretary of State



06062008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-7271061

Applicable or
Not Applicable

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

6. Name and Address of Current Registered Agent

**HEATH JR, RALPH T
18323 SUNSET BLVD
ST PETERSBURG, FL 33708**

**DO NOT WRITE
IN THIS SPACE**

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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**Filing Fee is \$61.25
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

PD
NAME: **HEATH JR, RALPH T**
STREET ADDRESS: **18323 SUNSET BLVD**
CITY-STATE-ZIP: **REDINGTON SHORES, FL 33708**

VD
NAME: **ALAN, JERRY**
STREET ADDRESS: **210 NORTH PINE DR.**
CITY-STATE-ZIP: **TAMPA, FL 33613**

VD
NAME: **MARLER, GEORGE**
STREET ADDRESS: **3820 PIEDMONT RD**
CITY-STATE-ZIP: **FT WORTH, TX 76116**

STD
NAME: **HEATH, HELEN**
STREET ADDRESS: **18323 SUNSET BLVD**
CITY-STATE-ZIP: **REDINGTON SHORES, FL 33708**

NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

000000954277
07/11/08-80006-011 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ralph T. Heath, Jr.
Ralph T. Heath, Jr.

July 7 2008 (727)391-6211
Date Daytime Phone