FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 29 PM 6:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **740989** **(9)**

1. Corporation Name

SUNCOAST BETTER BUSINESS FEDERATION, INC.

Principal Place of Business	Mailing Address
6460 W. GULF TO LAKE HWY SUITE #1 CRYSTAL RIVER FL 34429 US	6460 W. GULF TO LAKE HWY STE 1 CRYSTAL RIVER FL 34429 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/08/1977**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-1902730** ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BRUNSWICK, DOROTHY M.
8054 N. MARY TERRACE
CRYSTAL RIVER FL 34428

10. Name and Address of New Registered Agent

81 Name: Larry E. Vitt
82 Street Address (P.O. Box Number is Not Acceptable): 3311 E. Marcia St.
83
84 City: Inverness, FL 85 Zip Code: 34453

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: Larry E. Vitt — 4/25/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	VITT, LARRY E	12 NAME		
STREET ADDRESS	3311 E. MARCIA ST.	13 STREET ADDRESS		
CITY-ST-ZIP	INVERNESS FL	14 CITY-ST-ZIP		
TITLE	VD	21 TITLE		☐ Change ☐ Addition
NAME	VITT, PHYLLIS J	22 NAME		
STREET ADDRESS	3311 E. MARCIA ST.	23 STREET ADDRESS		
CITY-ST-ZIP	INVERNESS FL	24 CITY-ST-ZIP		
TITLE	TD	31 TITLE		☐ Change ☐ Addition
NAME	BRUNSWICK, DOROTHY M.	32 NAME		
STREET ADDRESS	8054 N. MARY TERRACE	33 STREET ADDRESS		
CITY-ST-ZIP	CRYSTAL RIVER FL	34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Larry E. Vitt — 4/25/95 — (904) 795-3547
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0084889