2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F63100

1. Entity Name

SUNCOAST LAND DEVELOPMENT CO., INC.



FILED Jan 16, 2008 08:00 A Secretary of State

Principal Place of Business

1456 NE OCEAN BLVD. BLDG. 10, APT. 202 Stuart, FL 34996 U Mailing Address

1456 NE OCEAN BLVD. BLDG. 10, APT. 202 STUART, FL 34996 U



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 01112008
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CARPENTIER, ANTHONY P
RI DG 10 APT 202

BLDG. 10, APT. 202 1456 NE OCEAN BLVD. STUART, FL 34996

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| OTOAKI, | 1 L 34330 | | | | | | |
|---|---|--|-------------------|---|--|--|--|
| | named entity submits this statement for the pions of registered agent. | urpose of changing its registere | ed office or r | egistered agent, or b | oth, in the State of Florida. I am familiar with, and accept | | |
| SIGNATURE_ | Signature, typed or printed name of registered agent and title if | applicable. (NOTE: Registered | J Agent signature | Agent signature required when reinstating) DATE | | | |
| FIL After Ma | E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00 | Election Campaign Finan Trust Fund Contribution. | icing | \$5.00 May Be Added to Fees | | | |
| 10. | OFFICERS AND DIREC | TORS | <u> </u> | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | PD CARPENTIER ANTHONY 1456 NE OCEAN BLVD SUITE 10-202 STUART, FL | | | | 01/16/08-80095-013 150.00 | | |
| CITY-ST-ZIP TITLE NAME | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | , | | NOT WRITE | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | IN ' | THIS SPACE | | |
| TITLE NAME STREET ADORESS CITY-ST-ZIP | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/08

772-486-0937

Daytime Phone:

A. P. CARPENTIER