

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003706

FILED
Mar 21, 2008
Secretary of State

Entity Name: SUN COAST RESOURCES, INC.

Current Principal Place of Business:

6922 CAVALCADE
HOUSTON, TX 77028 US

New Principal Place of Business:

Current Mailing Address:

6922 CAVALCADE
HOUSTON, TX 77028 US

New Mailing Address:

FEI Number: 76-0143483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LEHNE, KATHY E
Address: 6922 CAVALCADE
City-St-Zip: HOUSTON, TX 77028

Title: SECT () Delete
Name: SMITH, LISA L
Address: 6922 CAVALCADE
City-St-Zip: HOUSTON, TX 77028

Title: VP () Delete
Name: PALMER-HUGGINS, DENIESE
Address: 6922 CAVALCADE
City-St-Zip: HOUSTON, TX 77028

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LEHNE, KATHY E
Address: 6922 CAVALCADE
City-St-Zip: HOUSTON, TX 77028

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: DURAND, DIANA
Address: 6922 CAVALCADE
City-St-Zip: HOUSTON, TX 77028

Title: VP () Change (X) Addition
Name: LEHNE, KYLE
Address: 6922 CAVALCADE
City-St-Zip: HOUSTON, TX 77028

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA SMITH

CPA

03/21/2008

Electronic Signature of Signing Officer or Director

_____ Date