2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# F98000001315

Entity Name: SUN COAST INDUSTRIES OF DELAWARE, INC.

Current Principal Place of Business:

101 OAKLEY ST
EVANSVILLE, IN 477060959

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 959
EVANSVILLE, IN 477060959

New Mailing Address:

FEI Number: 59-1952968 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR STE 4
WESTON, FL 33331 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:	PD	( ) Delete
Name:	BOOTS, IRA G	
Address:	P O BOX 959	
City-St-Zip:	EVANSVILLE, IN 47706	
Title:	TSVD	( ) Delete
Name:	KRATOCHVIL, JAMES M	
Address:	P O BOX 959	
City-St-Zip:	EVANSVILLE, IN 47706	
Title:	VD	( ) Delete
Name:	BEELER, R B	
Address:	P O BOX 959	
City-St-Zip:	EVANSVILLE, IN 47706	
Title:	EXVP	( ) Delete
Name:	MILES, MARK	
Address:	P O BOX 959	
City-St-Zip:	EVANSVILLE, IN 47706	
Title:	V	( ) Delete
Name:	THOMPSON, JEFFREY D	
Address:	P O BOX 959	
City-St-Zip:	EVANSVILLE, IN 47706	
Title:	V	( ) Delete
Name:	BAUER, BRETT C	
Address:	P O BOX 959	
City-St-Zip:	EVANSVILLE, IN 47706	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	THOMPSON, JEFFREY D	
Address:	P O BOX 959	
City-St-Zip:	EVANSVILLE, IN 47706	
Title:	VP	(X) Change ( ) Addition
Name:	BAUER, BRETT C	
Address:	P O BOX 959	
City-St-Zip:	EVANSVILLE, IN 47706	

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: MARK MILES EXVP 04/22/2008

Electronic Signature of Signing Officer or Director Date