

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000004700

1. Entity Name
SUNCOAST MAGAZINE DISTRIBUTION, INC.



FILED
Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90024 041 ***558.75

Principal Place of Business
13101 56TH COURT
SUITE 816
CLEARWATER FL 33760

Mailing Address
13101 56TH COURT
SUITE 816
CLEARWATER FL 33760

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country

4. FEI Number 13-4057901
Applied For
Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

EGGER, JOHN
13101 56TH COURT
SUITE 816
CLEARWATER FL 33760

7. Name and Address of New Registered Agent

Name Tom allen
Street Address (P.O. Box Number is Not Acceptable)
13101 56th Court
Suite 816
City Clearwater FL Zip Code 33760

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.

SIGNATURE DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
C	LARSON, PETER	19 CEDAR DRIVE SOUTH	OLD BETHPAGE NY 11804	<input type="checkbox"/>
DST	RABEN, NORMAN	250 BEACON ST	BOSTON MA 02116	<input type="checkbox"/>
DP	EGGER, JOHN	17117 GULF BLVD #443	N REDINGTON BEACH FL 33708	<input checked="" type="checkbox"/>
DV	ALLEN, TOM	2063 SAN SEBASTIAN WAY	CLEARWATER FL 33763	<input type="checkbox"/>
D	COFFMAN, SCOTT	307 WILSON AVE #14	PANAMA CITY FL 32401	<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		21 Hunt Court	Upper Brookville NY 11545	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/8/00
Date

Daytime Phone #

CR2E034 (5/00)