2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G20793

FILED Jan 04, 2010 Secretary of State

Entity Name: SUNCOAST PENSION AND BENEFITS GROUP, INC.

Current Principal Place of Business: New Principal Place of Business:

320 W. FLETCHER 508 W. FLETCHER SUITE 107 SUITE 111

TAMPA, FL 33612 TAMPA, FL 33612 US

Current Mailing Address: New Mailing Address:

P. O. BOX 82040 TAMPA, FL 33682

FEI Number: 59-2250280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FEUTZ, JAMES R. FEUTZ, JAMES R. 508 W. FLETCHER AVENUE 320 W. FLETCHER AVENUE SUITE 107 SUITE 111 TAMPA, FL 33612 US TAMPA, FL 33612 US

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.

01/04/2010 SIGNATURE:

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

US

OFFICERS AND DIRECTORS:

Title:

Name: FEUTZ, JAMES R.

508 W. FLETCHER AVENUE, SUITE 111 Address:

City-St-Zip: TAMPA, FL 33612

Title:

Name: MILLER, NANCY T. 526 GARRARD DRIVE Address: TEMPLE TERRACE, FL 33617 City-St-Zip:

Title:

ANDUX, FRANCES E Name: 1222 BEACON HILL DRIVE Address: City-St-Zip: TAMPA, FL 33613

Title:

CONWAY, FRANCIS M Name: Address: 19002 ST. LAURENT DRIVE

City-St-Zip: LUTZ, FL 33558

Title:

CROWE, RICHARD A Name: Address: 15902 ELLSWORTH DRIVE

City-St-Zip: TAMPA, FL 33647

I hereby 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 all other like empowered.

SIGNATURE: JAMES R. FEUTZ PD 01/04/2010