

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 8:00 am
Secretary of State

01-20-2004 90074 034 ***150.00

DOCUMENT # H98445

1. Entity Name
SARASOTA SUN COAST REAL ESTATE, INC.



Principal Place of Business
1515 RINGING BOULEVARD
STE 1000
SARASOTA, FL 34236 US

Mailing Address
1515 RINGLING BOULEVARD
STE 1000
SARASOTA, FL 34236 US

C4000507



2. Principal Place of Business

1515 Ringling Blvd.
Suite, Apt. #, etc.
10th Floor

3. Mailing Address

P.O. Box 3018
Suite, Apt. #, etc.

01122004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
59-2675237

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

SKIPPER, J R
1515 RINGING BOULEVARD
10TH FLOOR
SARASOTA, FL 34236

7. Name and Address of New Registered Agent

Name
J. Ronald Skipper
Street Address (P.O. Box Number is Not Acceptable)
1515 Ringling Blvd.
City
FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* DATE: 1/14/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	VPD	<input type="checkbox"/> Delete
NAME	BARON, DAVID J.	
STREET ADDRESS	1515 RINGING BLVD STE 1000	
CITY-ST-ZIP	SARASOTA, FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	FERGESON, JAMES O. JR.	
STREET ADDRESS	1515 RINGLING BLVD. STE 1000	
CITY-ST-ZIP	SARASOTA, FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	KEYSER, STEPHEN B.	
STREET ADDRESS	1515 RINGLING BLVD STW 1000	
CITY-ST-ZIP	SARASOTA, FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SKIPPER, J. RONALD	
STREET ADDRESS	1515 RINGLING BLVD STE 1000	
CITY-ST-ZIP	SARASOTA, FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	TIRABASSI, E. RALPH	
STREET ADDRESS	1515 RINGLING BLVD STE 1000	
CITY-ST-ZIP	SARASOTA, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1515 Ringling Blvd., 10th Floor	
STREET ADDRESS	Sarasota, FL	
CITY-ST-ZIP	34236	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1515 Ringling Blvd., 10th Floor	
STREET ADDRESS	Sarasota, FL	
CITY-ST-ZIP	34236	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1515 Ringling Blvd., 10th Floor	
STREET ADDRESS	Sarasota, FL	
CITY-ST-ZIP	34236	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1515 Ringling Blvd., 10th Floor	
STREET ADDRESS	Sarasota, FL	
CITY-ST-ZIP	34236	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/04 (941) 957-1900
Date Daytime Phone #