

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J72893

1. Entity Name
SUNCOAST MULTI-SERVICES, INC.

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90065 034 ***150.00

0521236

Principal Place of Business
7001 TEMPLE TERR HWY
TEMPLE TERR FL 33637
US

Mailing Address
7001 TEMPLE TERR HWY
TEMPLE TERRACE FL 33637
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number 59-2809393
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YOUNG JR, JAMES S
7001 TEMPLE TERR HWY
TEMPLE TERR FL 33637

Name
Street Address (P.O. Box Number is Not Acceptable)
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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME YOUNG JR, JAMES S
STREET ADDRESS 7001 TEMPLE TERR HWY
CITY-ST-ZIP TEMPLE TERR FL 33637 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ~~DVS~~
NAME ~~LABRUZZO, JOE M.~~
STREET ADDRESS ~~824 E. FLETCHER~~
CITY-ST-ZIP ~~TAMPA FL~~ ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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: JAMES S. Young Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/01 813-980-1000
Date Daytime Phone #

CR2E034 (10/00)