## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 19962234 OF CORPORATIONS 🖊 **DOCUMENT #** K37154 1. Corporation Name FLORIDA SUNCOAST TOURISM PROMOTIONS, INC. Principal Place of Business Mailing Address 10750-75TH STREET 10750-75TH STREET LARGO FL 34647-1422 LARGO FL 34647-1422 3. Date Incorporated or Qualified 3a. Date of Last Report 10/06/1988 03/13/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2919820 Not Applicable Suite, Apl. #, etc. Suite Apt. #Letc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199,032, 25 Yes No 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 DECKER, DRAKE A. 82 Street Address (P.O. Box Number is Not Acceptable) 10750-75TH ST 83 **LARGO FL 34647** 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) Signature, typied or printed name of registered agent and the diapplicable DATE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1. 1 TITLE Change Addition NAME DECKER, DRAKE A. 1.2 NAME STREET ADERESS 10750-75TH ST 1.3 STREET ADDRESS LARGO FL C/TY-ST-Z/P 1.4 CITY - ST- ZIP THEF DELETE 2 1 TITLE Change ☐ Addition 2.2 NAME STREET ADORESS 23 STREET ADDRESS 011Y-51-20P 24 CHTY - ST-ZIP TIT: E DELETE 3 1 THILE ☐ Change Addition NAME 32 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY - ST- ZIP 3.4 City-St-ZiP 11118 DELFTE 4.1 TITLE Change . Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-ST ZP 4.4 CITY - ST - ZIP Table DELETE 5 1 TITLE ☐ Change ☐ Addition NAME 52 NAME STREET ADDRESS. 5.3 STREET ADDRESS CITY ST-ZIP 5 4 CITY - ST - ZIP THILF DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under catrift that I am an officer or director of the corporation of the receiver or truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name chrnent with an address anpears in Block 12 or Block 13 if changed, or on an

64 CITY-ST-ZIP

SIGNATURE:

CHY-SI-7IP

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Draue A. Decker SIGNATURE AND TYPED OF PRINTED NAME

2/4/26

CR2E034 (12/95)