

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 20, 2005 8:00 am
Secretary of State

05-04-2005 90046 048 ****50.00

DOCUMENT # M02000002465			
1. Entity Name SUNCOAST IDENTIFICATION TECHNOLOGIES, LLC			
Principal Place of Business 608 DANLEY DRIVE FT MYERS, FL 33907		Mailing Address 608 DANLEY DRIVE FT MYERS, FL 33907	
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 71-0883131		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SAVAGE, FRANK C/O C. ARC ADMINISTRATIVE SERVICES 13300 - 56 S. CLEVELAND AVENUE, #211 FT MYERS, FL 33907		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR C. ARC ADMINISTRATIVE SERVICES C/O 13300 - 56 S CLEVELAND AVENUE, E211 FT MYERS, FL 33907 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member/MGR Douglas Ministries/OFFICE OF OVERSEER 700 Columbia St. N.W. Port Charlotte, FL 33948 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FREEDOM UNLIMITED 700 COLUMBIA ST. PORT CHARLOTTE, FL 33948 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member/MGR Promiseland Ministries/OFFICE OF OVERSEER 6900-29 Daniels Parkway #331 FT. Myers, FL 33912 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARVESTER MINISTRIES 700 COLUMBIA ST. PORT CHARLOTTE, FL 33948 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member/MGR Walking in The Son Ministries OFFICE OF OVERSEER 14504 Frizzle Rd Port Charlotte, FL 33948 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <u>C. ARC Admin Serv</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date: <u>5/16/05</u> Daytime Phone: <u>239-822-5135</u>	