

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000000910

1. Entity Name

SUNCOAST SINGLES, INC.

APPROVED
AND
FILED

01 SEP 27 AM 8:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

5713 SALT KETTLE COURT
NEW PORT RICHEY FL 34652

Mailing Address

5713 SALT KETTLE COURT
NEW PORT RICHEY FL 34652

2. Principal Place of Business

5627 FERGUSON CT #120

Suite, Apt. #, etc.

#120

City & State

NEW PORT RICHEY FL

Zip

34652

Country

PASCO

3. Mailing Address

5627 FERGUSON CT

Suite, Apt. #, etc.

120

City & State

NEW PORT RICHEY FL

Zip

34652

Country

PASCO



DO NOT WRITE IN THIS SPACE

07/10/01 90124 021 - \$61.25

4. FEI Number

59-3639190

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORKE, REGINA
5713 SALT KETTLE COURT
NEW PORT RICHEY FL 34652

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME CORKE, REGINA
STREET ADDRESS 5713 SALT KETTLE COURT
CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE VD ☒ Delete
NAME TATE, WILLIS O JR.
STREET ADDRESS 13938 TREATY ROAD
CITY-ST-ZIP BROOKSVILLE FL 34610

TITLE SD ☐ Delete
NAME NICHOLS, AUDREY
STREET ADDRESS 3402 ALLENDALE DRIVE
CITY-ST-ZIP HOLIDAY FL 34691

TITLE TD ☐ Delete
NAME LARGE, VIRGINIA
STREET ADDRESS 4905 YELLOWSTONE DRIVE
CITY-ST-ZIP NEW PORT RICHEY FL 34655

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME SMERECKI, LARRY
STREET ADDRESS 5627 FERGUSON CT #120
CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE VD ☒ Change ☐ Addition
NAME ELLIOTT, THOMAS
STREET ADDRESS 12604 PINEBROOK LA
CITY-ST-ZIP HUDSON FL 34667

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

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

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

TITLE ☐ Change ☐ 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 617, 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: Virginia Large REQUIRED

9-21-01 727-375-5154

CR2E037 (5/01)

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