

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005918

FILED
Jan 20, 2005
Secretary of State

Entity Name: THE SUNCOAST NATURISTS, INC.

Current Principal Place of Business:

3104 HERON SHORES DR
VENICE, FL 34293

New Principal Place of Business:

Current Mailing Address:

PO BOX 187
SARASOTA, FL 342300187

New Mailing Address:

FEI Number: 65-1038363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, KENNETH W
3104 HERON SHORES DR
VENICE, FL 34293 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS, KENNETH W
Address: 3104 HERON SHORES DR
City-St-Zip: VENICE, FL 34293

Title: T () Delete
Name: LYON, ROBERT
Address: 4718 TIVOLI AVE
City-St-Zip: SARASOTA, FL 34235

Title: D () Delete
Name: BRANDHORST, WESLEY
Address: 3346 YONGE AVE
City-St-Zip: SARASOTA, FL 34235

Title: D () Delete
Name: BRANDHORST, JANE
Address: 3346 YONGE AVE
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BRANDHORST, WESLEY
Address: 3346 YONGE AVE
City-St-Zip: SARASOTA, FL 34235

Title: S (X) Change () Addition
Name: BRITTON, DIANA
Address: 129 RIO TERRA
City-St-Zip: VENICE, FL 34285

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH W. THOMAS

P

01/20/2005

Electronic Signature of Signing Officer or Director

Date