

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90160 002 ****61.25

DOCUMENT # N00000005918

1. Entity Name

THE SUNCOAST NATURISTS, INC.



Principal Place of Business

**220 SORRENTO DR.
OSPREY FL 34229**

Mailing Address

**PO BOX 1446
OSPREY FL 34229-1446**

2. Principal Place of Business

3104 HERON SHORES DR

3. Mailing Address

PO BOX 187

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

VENICE FL

City & State

SARASOTA FL

4. FEI Number **65-1038363**

Applied For

Not Applicable

Zip

34293

Country

SARASOTA

Zip

34230-0187

Country

SARASOTA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**THOMAS, KENNETH W
220 SORRENTO DR.
OSPREY FL 34229**

7. Name and Address of New Registered Agent

Name

THOMAS, KENNETH W

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

3104 HERON SHORES DR

City

VENICE

FL

Zip Code

34293

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/11/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **THOMAS, KENNETH W**
STREET ADDRESS **220 SORRENTO DR. 3104 HERON SHORES DR.**
CITY-ST-ZIP **OSPREY FL 34229 34293**

TITLE **D** ☒ Delete
NAME **MAYZY, JEAN**
STREET ADDRESS **3106 HERON SHORES DR.**
CITY-ST-ZIP **VENICE FL 34293**

TITLE **D** ☒ Delete
NAME **LYON, ROBERT**
STREET ADDRESS **4718 TIVOLI AVE**
CITY-ST-ZIP **SARASOTA FL 34235**

TITLE **D** ☒ Delete
NAME **BRANDMORST, JANE**
STREET ADDRESS **3346 YOUNG AVENUE**
CITY-ST-ZIP **SARASOTA FL 34235**

TITLE **V** ☒ Delete
NAME **ROCK, MARTY**
STREET ADDRESS **900 S BLVD OF PRESIDENTS #5**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PRES.** ☒ Change ☐ Addition
NAME **Thomas, Kenneth**
STREET ADDRESS **3104 HERON SHORES DR**
CITY-ST-ZIP **VENICE, FL 34293**

TITLE **TREASURER** ☒ Change ☐ Addition
NAME **LYON, ROBERT**
STREET ADDRESS **4718 TIVOLI AVE**
CITY-ST-ZIP **SARASOTA FL 34235**

TITLE **BRANDMORST, JANE** ☐ Change ☒ Addition
NAME **BRANDMORST, WESLEY**
STREET ADDRESS **3346 YOUNG AVE**
CITY-ST-ZIP **SARASOTA FL 34235**

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:

Signature of Kenneth W. Thomas, President

4/11/03 9414088873

CR2E037 (10/02)