

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000493

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: SUNCOAST SEARCH AND RESCUE, INC.

**Current Principal Place of Business:**

910 PROSPECT AVENUE  
LEHIGH ACRES, FL 33936

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1693  
LEHIGH ACRES, FL 33970

**New Mailing Address:**

FEI Number: 30-0020196

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EVANS, ROBERT J  
910 PROSPECT AVENUE  
LEHIGH ACRES, FL 33936 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: D ( ) Delete  
Name: EVANS, ROBERT J  
Address: 910 PROSPECT AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D ( ) Delete  
Name: EVANS, MARIA  
Address: 910 PROSPECT AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D ( ) Delete  
Name: JOHNSON, LARRY  
Address: 18683 BASELEG AVENUE  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D ( ) Delete  
Name: EDWARDS, FRED  
Address: 3820 EXCHANGE AVENUE  
City-St-Zip: NAPLES, FL 34104

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: ROBERT J. EVANS

D

04/30/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date