

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002074

FILED
Apr 24, 2005
Secretary of State

Entity Name: SUN COAST CHAMBER CONCERTS, INC.

Current Principal Place of Business:

3528 JAFFA DRIVE
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

3528 JAFFA DRIVE
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 03-0450818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, JOE
3528 JAFFA DRIVE
SARASOTA, FL 34239 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: DP () Delete
Name: PLATT, THEODORE
Address: 3528 JAFFA DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: DT () Delete
Name: MARTINEZ, JOE
Address: 3528 JAFFA DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: DVP () Delete
Name: GENTILE, DOMINIC
Address: 416 SPADARO DR
City-St-Zip: VENICE, FL 34285

Title: DS () Delete
Name: HAMILTON, ROBERTA
Address: 4196 BOWLING GREEN CIR
City-St-Zip: SARASOTA, FL 34233

Title: DS () Delete
Name: MILLER, EVELYN
Address: 1573 BAYSHORE RD
City-St-Zip: NOKOMIS, FL 34275

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:

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: JOE MARTINEZ

DT

04/24/2005

Electronic Signature of Signing Officer or Director

Date