# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 26, 2005**
**Secretary of State**

DOCUMENT# N04000009350

**Entity Name:** SUNCOAST COMMUNITY FOUNDATION, INC.

**Current Principal Place of Business:**

2801 NEXCHANGE COURT
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

2801 EXCHANGE COURT
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

2801 NEXCHANGE COURT
WEST PALM BEACH, FL 33409

**New Mailing Address:**

2801 EXCHANGE COURT
WEST PALM BEACH, FL 33409

**FEI Number: 20-1689234** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

COCHRANE, THOMAS E JR
2801 NEXCHANGE COURT
WEST PALM BEACH, FL 33409 US

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

COCHRANE, THOMAS E JR
2801 EXCHANGE COURT
WEST PALM BEACH, FL 33409 US

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: _____ 04/26/2005
Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: COCHRANE, THOMAS E JR
Address: 7195 DEER POINT LANE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D ( ) Delete
Name: COCHRANE, REYNOLDS J
Address: 1132 MYSTIC WAY
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete
Name: COCHRANE, JOEL F
Address: 425 MERMAID COVE
City-St-Zip: PATRICK AIR FORCE BASE, FL 32925

**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:

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: THOMAS E. COCHRANE, JR. D 04/26/2005
Electronic Signature of Signing Officer or Director — Date