

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003875

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: SUNCOAST FOSTER PARENT ASSOCIATION, INC.

## Current Principal Place of Business:

1002 EAST PALM AVENUE  
TAMPA, FL 33602 US

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 89944  
TAMPA, FL 336890416 US

## New Mailing Address:

217 SKYWOOD DRIVE  
VALRICO, FL 33594 US

FEI Number: 37-1508420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARDNER, JOHN W ESQ.  
21 EAST ROBERTSON STREET  
BRANDON, FL 33511 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: ELLIOTT, VICTORIA MRS.  
Address: P. O. BOX 2475  
City-St-Zip: VALRICO, FL 33595 US

Title: DV ( ) Delete  
Name: LAMPKIN, RHONDA MRS.  
Address: 5904 S. 81ST STREET  
City-St-Zip: TAMPA, FL 33619 US

Title: DT ( ) Delete  
Name: JACKSON, SHEMAKA MRS.  
Address: 1320 DEW BLOOM ROAD  
City-St-Zip: VALRICO, FL 33595 US

Title: DS ( ) Delete  
Name: GOCEK, AILEEN MRS.  
Address: 24430 PAINTER DRIVE  
City-St-Zip: LAND O' LAKES, FL 34539 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: FACENDA, NANCY MRS.  
Address: 217 SKYWOOD DRIVE  
City-St-Zip: VALRICO, FL 33594 US

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

Title: DT (X) Change ( ) Addition  
Name: JOHNSON, BRENDA MRS.  
Address: 1225 ALPINE LAKE DRIVE  
City-St-Zip: BRANDON, FL 33511 US

Title: DS (X) Change ( ) Addition  
Name: FUDGE, TRACY MRS.  
Address: 1235 ALPINE LAKE DRIVE  
City-St-Zip: BRANDON, FL 33511 US

Title: COMP ( ) Change (X) Addition  
Name: ROBBINS, CARRIE MRS.  
Address: 510 HOLLY LANE  
City-St-Zip: BRANDON, FL 33511

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NANCY FACENDA

DP

02/19/2009

Electronic Signature of Signing Officer or Director

Date