

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007856

FILED
Feb 05, 2009
Secretary of State

Entity Name: FLORIDA SUNCOAST SILVER BELLES, INC.

Current Principal Place of Business:

4061 58TH AVENUE NO #215
ST PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

4061 58TH AVENUE NO #215
ST PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 26-3238716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROKE, JANICE
12501 ULMERTON RD #200
LARGO, FL 33774 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: FREUND, ELLEN
Address: 2294 BELGIAN LANE #10
City-St-Zip: CLEARWATER, FL 33763

Title: DVP () Delete
Name: KELLER, JOAN D
Address: 7501 MEDITERANEAN CT
City-St-Zip: HUDSON, FL 34667

Title: DVP () Delete
Name: MILLER, MEL
Address: 3661 67TH AVE NO
City-St-Zip: PINELLAS PARK, FL 33781

Title: DS () Delete
Name: ASSELIN, MARGE
Address: 4061 58TH AVENUE N #215
City-St-Zip: ST PETERSBURG, FL 33714

Title: DT () Delete
Name: TROKE, JANICE
Address: 12501 ULMERTON RD #200
City-St-Zip: LARGO, FL 33774

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 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: JANICE TROKE

TRES

02/05/2009

Electronic Signature of Signing Officer or Director

Date