

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10298

FILED
Jan 13, 2010
Secretary of State

Entity Name: SUNCOAST AUXILIARY #3153, INCORPORATED

Current Principal Place of Business:

5446 LEISURE LANE
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

5446 LEISURE LANE
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: 23-7131604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, ISABELLE
4510 RICKOVER COURT
NEW PORT RICHEY, FL 34652 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: SD
Name: MYERS, KATHY
Address: 13205 SHADBERRY LANE
City-St-Zip: BAYONET POINT, FL 34667

Title: TD
Name: HANUS, LOIS
Address: 5116 CABRILLA CT
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP
Name: WATKINS, BONNIE
Address: 4917 MANOR DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DMP
Name: WILSON, ISABELLE
Address: 4510 RICKOVER COURT
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby 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 all other like empowered.

SIGNATURE: ISABELLE WILSON

DMP

01/13/2010

Electronic Signature of Signing Officer or Director

Date