

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11838

FILED
Apr 26, 2009
Secretary of State

Entity Name: SUN COAST AVIAN SOCIETY, INC.

Current Principal Place of Business:

1802 EAST HENRY AVENUE
TAMPA, FL 33610 US

New Principal Place of Business:

Current Mailing Address:

1802 EAST HENRY AVENUE
TAMPA, FL 33610 US

New Mailing Address:

FEI Number: 59-2640488 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARPER, RODNEY L
1802 E HENRY AVE.
TAMPA, FL 33610 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: D () Delete
Name: NELSON, JAMES
Address: 981 DAMROSCH ST.
City-St-Zip: LARGO, FL 33771

Title: S () Delete
Name: GATTASHALL, JAMES W
Address: 1802 E. HENRY AVE
City-St-Zip: TAMPA, FL 33610

Title: P () Delete
Name: SAULSGIVER, BEN
Address: 3630 WILTSHIRE DR.
City-St-Zip: HOLIDAY, FL 34691

Title: D () Delete
Name: CARTER, TINA
Address: 821 14TH AVE. N.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: T () Delete
Name: HARPER, RODNEY
Address: 1802 E HENRY AVE
City-St-Zip: TAMPA, FL 33610

Title: VP () Delete
Name: HOWARD, MARI
Address: 3145 ALLEN AVE., RR. #2
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: CARTER, TINA
Address: 821 14TH AVE. NORTH
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D (X) Change () Addition
Name: RAISCH, MARK
Address: 1229791 91ST. TERRACE NORTH
City-St-Zip: SEMINOLE, FL 33772

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: RODNEY L. HARPER

T

04/26/2009

Electronic Signature of Signing Officer or Director

Date