

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90308 034 ****61.25

DOCUMENT # N14599

1. Entity Name

THE SUNCOASTERS, INC. OF PINELLAS COUNTY

Principal Place of Business

C/O ELEANOR K. SPIRES
14130 ROSEMARY LANE, APT 3301
LARGO FL 34644-2919
US

Mailing Address

% ELEANOR K. SPIRES
14130 ROSEMARY LANE, APT. 3301
LARGO FL 34644-2919
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2636056

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIRES, ELEANOR K.
CONDO #3301
14130 ROSEMARY LANE
LARGO FL 34644-2919

7. Name and Address of New Registered Agent

Name

Ann V. MacPherson

Street Address (P.O. Box Number is Not Acceptable)

12090 Meadowbrook Lane

City

Largo

FL

Zip Code

33774-3144

8. 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.

1/26/01

SIGNATURE **Ann V. MacPherson, Secretary, Board of Directors, Suncoasters, Inc. of Florida**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE **SD** ☐ Delete
NAME **DUNLOP, KAY**
STREET ADDRESS **595 LENTZ RD**
CITY-ST-ZIP **BELLAIRE BLUFFS FL 33770**

TITLE **P** ☒ Delete
NAME **KEMP, ELEANOR**
STREET ADDRESS **12100 SEMINOLE BLVD #46**
CITY-ST-ZIP **LARGO FL-33778**

TITLE **VP** ☒ Delete
NAME **MUTTABAUGH, AUDREY**
STREET ADDRESS **10878 101ST AVE**
CITY-ST-ZIP **SEMINOLE FL 33772**

TITLE **T** ☒ Delete
NAME **BURL, HELENA**
STREET ADDRESS **12501 ULMERTON RD #124**
CITY-ST-ZIP **LARGO FL 33774**

TITLE **ASD** ☒ Delete
NAME **SPIRES, ELEANOR**
STREET ADDRESS **1413 ROSEMARY LN #3301**
CITY-ST-ZIP **LARGO FL 33774**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☒ Change ☐ Addition
NAME **Audrey Mutzabaugh**
STREET ADDRESS **10878 101st Ave, N.**
CITY-ST-ZIP **Seminole, FL 33772**

TITLE **VP** ☒ Change ☐ Addition
NAME **Edith Bowland**
STREET ADDRESS **13800 Joyce Drive**
CITY-ST-ZIP **Largo, FL 33774**

TITLE **T** ☒ Change ☐ Addition
NAME **Cecilia Johnson**
STREET ADDRESS **13840 Joyce Drive**
CITY-ST-ZIP **Largo, FL 33774**

TITLE **ASD** ☒ Change ☐ Addition
NAME **Ann V. MacPherson**
STREET ADDRESS **12090 Meadowbrook Lane**
CITY-ST-ZIP **Largo, FL 33774**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ann V. MacPherson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/26/01

Daytime Phone #

CR2E037 (10/00)