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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N14863 (7)

1. Corporation Name

SUNCOAST NEW NEIGHBORS, INC.



Principal Place of Business

Mailing Address

% JOYCE CHERRY
1855 PINE CONE CIRCLE, SUITE 22
CLEARWATER FL 34620

% JOYCE CHERRY
1855 PINE CONE CIRCLE, SUITE 22
CLEARWATER FL 34620

3. Date Incorporated or Qualified
05/12/1986

3a. Date of Last Report
02/20/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHERRY, JOYCE
1855 PINE CONE CIRCLE #22
SUITE 22
CLEARWATER FL 34620

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME HOFFMAN, ELLIE
STREET ADDRESS 106 TANGLEWOOD COURT
CITY-ST-ZIP SAFETY HARBOR FL

TITLE VP
NAME GRIMM, VIVIAN
STREET ADDRESS 126 OLD OAK CIRCLE
CITY-ST-ZIP PALM HARBOR FL

TITLE S
NAME DASSING, BERT
STREET ADDRESS 39650 US HWY 19 N., #426
CITY-ST-ZIP TARPON SPRINGS FL

TITLE T
NAME SJEIME, PAT
STREET ADDRESS 2671 SABAL SPRINGS CIRCLE, #A103
CITY-ST-ZIP CLEARWATER FL

TITLE D
NAME CHERRY, JOYCE
STREET ADDRESS 1855 CONE CIRCLE #22
CITY-ST-ZIP CLEARWATER FL

TITLE D
NAME LUTHER, JUDY
STREET ADDRESS 10 GREENHAVEN CIRCLE
CITY-ST-ZIP OLDSMAR FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME BEVERLY HISEY
1.3 STREET ADDRESS 2537-J ROYAL PINE CIRCLE
1.4 CITY-ST-ZIP CLEARWATER, FL. 34623

2.1 TITLE VP
2.2 NAME JUDY LUTHER
2.3 STREET ADDRESS 10 GREENHAVEN CIRCLE
2.4 CITY-ST-ZIP OLDSMAR, FL. 34627

3.1 TITLE S
3.2 NAME GERTRUDE WESTLUND
3.3 STREET ADDRESS 3021 STATE ROAD 590, #503
3.4 CITY-ST-ZIP CLEARWATER, FL. 34619

4.1 TITLE
4.2 NAME MARY LOUISE VAN SKIVER
4.3 STREET ADDRESS 29141 U.S. HWY. 19 N., #86
4.4 CITY-ST-ZIP CLEARWATER, FL. 34621

5.1 TITLE D
5.2 NAME JOYCE CHERRY
5.3 STREET ADDRESS 1855 PINE CONE CIRCLE-APT. 22
5.4 CITY-ST-ZIP CLEARWATER, FL. 34620

6.1 TITLE D
6.2 NAME NORMA JEAN RUESSMAN
6.3 STREET ADDRESS 2260 SEQUOIA DRIVE
6.4 CITY-ST-ZIP CLEARWATER, FL. 34623

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Joyce Cherry, Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/96

Date

531-9178

Daytime Phone

CR2E037 (12/95)