FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1006

	1990	DIVIDION	OF CONFORMIONS				
DOCUMENT # N17501 (0)							
SUNC	OAST SUZUKI PLAYERS, II	NC.					
					1 10111111)	1(6)); 311() (64)
Director I Direct							
Principal Place of Business Mailing Address							****** ***** ****
C/O HELENE J. MALPEDE 1212- 44TH STREET WEST			C/O HELENE J. MALPEDE 1212- 44TH STREET WEST BRADENTON FL 34209				
554554 mari at a							
					 Date Incorporated or Qualified 10/24/1986 	3a. Date of Last 04/18/1	Report
2. Principal Place of Business 2a. Mailing		2a. Mailing Address	ng Address		4. FEI Number		Applied For
21		26	26		59-2732722		Not Applicable
Suite, Apt. #, etc.		─	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional
City & State		City & State				Fee Fee	Required
23		28			Election Campaign Financing Trust Fund Contribution		May Be
Ζip	Country	Zip	Country		8. This corporation has liability for in		d to Fees
24	25	29	30			Yes No	188.002,
	9. Name and Address of Curre	ent Registered Agent	81 Na		10. Name and Address of New Re	gistered Agent	
FRANCE), HELENE J. MALPEDE		61 Na	ime			
1212- 44	82 St	reet Addre	ss (P.O. Box Number is Not Acceptable)			
BRADENTON FL 33505			83				
			84 Ci			I a a l' =	
			1 1	•			Code
or register	to the provisions of Sections 617,050 red agent, or both, in the State of Flor)2 and 617.1508, Florida Sta rida. Such change was autho	tutes, the above-name orized by the corporati	ed corporation's board	tion submits this statement for the purp of directors. I hereby accept the appoi	ose of changing its r	egistered office
TEACH PROPERTY OF THE	ith, and accept the obligations of, Sec	ction 617.0503, Florida Statu	tes.			as regiotorea	agom: ram
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable	(NOTE: Registered Agent sign	sture required v	when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	PD FRANCO, HELENE J.	DELETE	1.1 TITLE			Change	Addition
NAME STREET ADDRESS	1212- 44TH STREET WEST		1.2 NAME				
CITY-ST-ZIP	BRADENTON FL		1.3 STREET ADDR	ESS			
TITLE	DVP	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE			Change	Addition
NAME	ROBACK, IRAS L.		2.2 NAME				
STREET ADDRESS	1807-80TH ST. CT. W.		23 STREET ADDR	ESS			
CITY-ST-ZIP	BRADENTON FL	- Date tar	2. 4 CiTY-ST-ZiF		77.		
TITLE NAME	ROBACK, JOSEPH	DELETE	3.1 TITLE			Change	☐ Addition
STREET ADDRESS	1807-80TH ST. CT. W.		3.2 NAME 3.3 STREET ADDR	ess			
CITY-ST-ZIP	Bradenton Fl		3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDR	ESS			
CITY-S1-ZIP TITLE		DOELETE	4.4 CITY-ST-ZIP			C7 05	
NAME		Docete	5.1 TITLE 5.2 NAME			Change	Addition
STREET ADDRESS			5.3 STREET ADDR	ss l			İ
CITY-\$1-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE		197 i.i.i.	☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDR	SS			
14. I do hereb	y certify that the information supplied	with this filing is voluntarily fu	6.4 CITY-ST-ZIP urnished and does not	qualify for	the exemption stated in Section 119.0	7(3)(k). Florida Statute	es I further
And file that						Targetti i tari tala estatele	/ - 1 101 H (C)

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

SIGNATURE: _

4-11-96 941-747-5338