

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34968

FILED
Apr 28, 2008
Secretary of State

Entity Name: SUNCOAST GENEALOGY SOCIETY INC.

Current Principal Place of Business:

2330 NEBRASKA AVE
PALM HARBOR, FL 346821294 US

New Principal Place of Business:

Current Mailing Address:

931 CEDARWOOD DRIVE
DUNEDIN, FL 34698 US

New Mailing Address:

FEI Number: 59-2979368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, NANCY E MS
931 CEDARWOOD DRIVE
DUNEDIN, FL 34698 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: P () Delete
Name: JAMES, ANN
Address: 2850 CHANCERY LN
City-St-Zip: CLEARWATER, FL 33759

Title: VP () Delete
Name: JANSOLN, JANICE
Address: 4817 HUMMINGBIRD TRAIL
City-St-Zip: PALM HARBOR, FL 34683

Title: S () Delete
Name: JOHNSON, PATRICIA
Address: 39650 US HWY 19 N APT 324
City-St-Zip: TARPON SPRINGS, FL 34689

Title: T () Delete
Name: NIELSON, CHARLOTTE
Address: 20 DURHAM CT
City-St-Zip: PALM HARBOR, FL 34683

Title: VP () Delete
Name: ALLEN, NANCY E
Address: 931 CEDARWOOD DR
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: HARRIS, LEWIS
Address: 711 DELAWARE AVE
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALLEN, NANCY E
Address: 931 CEDARWOOD DR
City-St-Zip: DUNEDIN, FL 34698

Title: S (X) Change () Addition
Name: JANSOLN, JANICE
Address: 4817 HUMMINGBIRD TRAIL
City-St-Zip: PALM HARBOR, FL 34683

Title: VP (X) Change () Addition
Name: MANGAM, JOHM
Address: 809 HAMMOCK PINE BLVD
City-St-Zip: CLEARWATER, FL 33761

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

Title: D (X) Change () Addition
Name: HARMON, SHARI
Address: 1864 NORTHWOOD DR
City-St-Zip: CLEARWATER, FL 33764

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: NANCY E ALLEN

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date