

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 29 1998 8:00am
Secretary of State

• NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N35665 (1)
1. Corporation Name

THE SUNCOAST CHAPTER OF THE AMERICAN SOCIETY OF
CLU & CHFC, INC.

Principal Place of Business

Mailing Address

P.O. BOX 60231
ST. PETERSBURG FL 33784

P.O. BOX 60231
ST. PETERSBURG FL 33784

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAY, ALLAN
8868 PARK BLVD
LARGO FL 34647

61 Name GEORGE ALEXIOU
62 Street Address (P.O. Box Number is Not Acceptable)
2630 SR 590
63
64 City CLEARWATER FL 85 Zip Code 34619

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)

3-10-98
DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VP-
ALEXIOU, GEORGE
2630 SR 590
CLEARWATER FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
HELPHREY, DAVID
1988 SPANISH PINES DR
PALM HARBOR FL 34683

TITLE NAME STREET ADDRESS CITY-ST-ZIP

CROOMS, STANLEY
250 MIRROR LAKE DR N
ST. PETERSBURG FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
GAGHIARDI, JAMES
1101 BELCHER RD #G
LARGO FL 34641

TITLE NAME STREET ADDRESS CITY-ST-ZIP

KAY, ALAN
8868 PARK BLVD
LARGO FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
VANDEY, WAYNE
380 EXECUTIVE CENTER DR W #100
ST. PETERSBURG FL 33700

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

PRESIDENT
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

PAST PRESIDENT
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY-ST-ZIP

8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY-ST-ZIP

9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY-ST-ZIP

10.1 TITLE 10.2 NAME 10.3 STREET ADDRESS 10.4 CITY-ST-ZIP

11.1 TITLE 11.2 NAME 11.3 STREET ADDRESS 11.4 CITY-ST-ZIP

12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY-ST-ZIP

14. 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 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:

3-10-98

CR2E037 (10/97)