

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35688

FILED  
Mar 29, 2009  
Secretary of State

Entity Name: SUNCOAST CLASSIC JAZZ, INC.

## Current Principal Place of Business:

1100 S. BELCHER RD.  
#732  
ST. PETERSBURG, FL 33771 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1945  
LARGO, FL 337791945 US

## New Mailing Address:

FEI Number: 59-2986002      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FANNING, DAVID S  
7602 DARTMOUTH AVE N  
SAINT PETERSBURG, FL 33710 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: D ( ) Delete  
Name: FANNING, DAVID  
Address: 7602 DARTMOUTH AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: D ( ) Delete  
Name: DOMBER, MAT  
Address: 2189 CLEVELAND STREET, #225  
City-St-Zip: CLEARWATER, FL 33765

Title: D ( ) Delete  
Name: KELLY, MAXINE  
Address: 10265 ULMERTON RD.  
City-St-Zip: LARGO, FL

Title: D ( ) Delete  
Name: JACOBS, CHARLIE  
Address: 1867 BRENTWOOD DR  
City-St-Zip: CLEARWATER, FL 33761

Title: D ( ) Delete  
Name: WIMPFEN, SHIRLEY  
Address: 1915 58TH ST SOUTH  
City-St-Zip: GULF PORT, FL 33707

Title: MS ( ) Delete  
Name: DRAGON, JOAN  
Address: 1100 S. BELCHER RD., #732  
City-St-Zip: LARGO, FL 33771

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: SHIRLEY A. WIMPFEN

TREA

03/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date