

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2008 08:00 AM
Secretary of State

DOCUMENT # N42859

1. Entity Name
SUNCOAST LEADERSHIP FOUNDATION, INC.



Principal Place of Business
**P.O. BOX 70016
SARASOTA, FL 34278**

Mailing Address
**P.O. BOX 70016
SARASOTA, FL 34278**



04082008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
65-0256333

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BEW, ROBERT A REV.
5250 MANZ PLACE
#113
SARASOTA, FL 34232**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KELLEY, RON DR.
STREET ADDRESS	7125 FRUITVILLE RD., #393
CITY-ST-ZIP	SARASOTA, FL 34240
TITLE	D
NAME	BEW, ROBERT A REV
STREET ADDRESS	5250 MANZ PLACE #113
CITY-ST-ZIP	SARASOTA, FL 34232
TITLE	D
NAME	BEW, MARY
STREET ADDRESS	5250 MANZ PLACE., #113
CITY-ST-ZIP	SARASOTA, FL 34232
TITLE	D
NAME	DOUGLAS, TOM REV.
STREET ADDRESS	5203 MENNO SIMONS PKWY #204
CITY-ST-ZIP	SARASOTA, FL 34232
TITLE	D
NAME	CUNNINGHAM, DONALD C
STREET ADDRESS	4538 HAMLETS GROVE DR
CITY-ST-ZIP	SARASOTA, FL 34235
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000892731
04/23/08-80076-020 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Robert A. Bew April 8, 2008 (941) 371-2750 x351