2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 16, 2008 8:00 am Secretary of State

DOCUMENT # N43802 1. Entity Name SUNCOAST FLORIDA CHAPTER OF THE AMERICAN SOCIETY FOR TRAINING AND DEVELOPMENT, INC.					Secretary of State 05-16-2008 90017 028 ****61.25					
1640 KING STREET Alexandria, va 22313		Mailing Address P.O. BOX 273114 TAMPA, FL 33688		1 4						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			05122008 (Chg-NP	CR2E03	7 (12/06)		
City & State		City & State			4. FEI Number 59-30830	70			plied For t Applicable	
Zip	Country	Zip	Cou	ntry	5. Certificate of S	Status Desired		8.75 Add ee Required		
	6. Name and Address of Current	Registered Agent			7. Name and Ad	dress of New	Registered A	gent		
FROMAN, JO ANN P VT				Name Jennifer Seavey						
	ATEATCHER TERRACE		ļ	Street Address (P.O. Box Number is Not Acceptable)						
BRADENTON, FL 34202				50	03 W.	count	ry Clo	1501		
				City So	rasota		FL	Zip Gode	1243	
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										
SIGNATURE Signature, types of printed name of registered agent and that if applicable. (NOTE: Registered Agent eigneture required when reinstating) DATE										
	Signature, types or priviled name or registered agent	and takin applicable. (NOS)	:: Hegisterer	d Agent signature require	d when reinstating)		DATE			
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2. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida 34 tutes. 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 impowered.

SIGNATURE:

SIGNATURE AND TYPED OFFICER OR DIPLETOR

5-1-08 941-359-676 Data Dayline Phone #