

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # N47700
 1. Entity Name
SUNCOAST PLAZA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
 2400 SO MCCALL RD
 ENGLEWOOD, FL 34223

Mailing Address
 P.O. BOX 974
 ENGLEWOOD, FL 34295



01102005 No Chg-NP CR2E037 (10/03)

4. FEI Number
 65-0329145 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DIGNAM, THOMAS M
 1201 SO. MCCALL RD.
 ENGLEWOOD, FL 34223

DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DIGNAM, THOMAS M.
STREET ADDRESS	1201 S. MCCALL ROAD
CITY - ST - ZIP	ENGLEWOOD, FL
TITLE	D
NAME	NEWELL, DARRYL
STREET ADDRESS	3579 ACCESS ROAD SUITE L
CITY - ST - ZIP	ENGLEWOOD, FL
TITLE	D
NAME	CHASE, TODD MD
STREET ADDRESS	2400 CMCAL RD SO
CITY - ST - ZIP	ENGLEWOOD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

110000183982
 01/20/05-80012-010 61.25

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____ Date: 1-10-05 Daytime Phone #: 941 474-6715