

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47703

FILED
Apr 15, 2004
Secretary of State

Entity Name: SUNCOAST PSYCHOANALYTIC ASSOCIATION, INC.

Current Principal Place of Business:

1850 LEE ROAD, SUITE 103
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

1850 LEE ROAD, SUITE 103
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-3122501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAYER, WILLIAM
1850 LEE ROAD, SUITE 103
WINTER PARK, FL 32789

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: TD () Delete
Name: DALSEMER, PATRICK
Address: 1850 LEE RD., #103
City-St-Zip: WINTER PARK, FL 32789

Title: PD () Delete
Name: PLAYER, WILLIAM
Address: 1850 LEE ROAD 103
City-St-Zip: WINTER PARK, FL 32789

Title: VD () Delete
Name: WIENER, ERIC
Address: 7353 WEST SANDLAKE ROAD
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: DAVIS, LEIF
Address: 7353 WEST SANDLAKE RD.
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: TURNER, SEAN
Address: 1850 LEE RD. 103
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: PLAYER, WILLIAM
Address: 1850 LEE ROAD 103
City-St-Zip: WINTER PARK, FL 32789

Title: PD (X) Change () Addition
Name: WIENER, ERIC
Address: 7353 WEST SANDLAKE ROAD
City-St-Zip: ORLANDO, FL 32819

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

Title: VD (X) Change () Addition
Name: TURNER, SEAN
Address: 1850 LEE RD. 103
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ERIC WIENER

PD

04/15/2004

Electronic Signature of Signing Officer or Director

Date