

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 16 1998 8:00am
Secretary of State

| | | |
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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # **N93000001150 (2)**

1. Corporation Name

SUN COAST SHAG CLUB, INC.

Principal Place of Business

Mailing Address

**9290 136 WAY N
SEMINOLE FL 33776
US**

**9290 136TH WAY N
SEMINOLE FL 33776
US**

2. Principal Place of Business

2a. Mailing Address

| | |
|------------------------|------------------------|
| 21 Suite, Apt. #, etc. | 26 Suite, Apt. #, etc. |
| 22 City & State | 27 City & State |
| 23 Zip | 28 Zip |
| 24 Country | 29 Country |
| 25 | 30 |

3. Date Incorporated or Qualified

03/01/1993

4. FEI Number

59-3166790

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KOSEK, ROBERT
9290 136 WAY N
SEMINOLE FL 33776**

| |
|---|
| 81 Name |
| 82 Street Address (P.O. Box Number is Not Acceptable) |
| 83 |
| 84 City |
| 85 Zip Code |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|------------------------------|---|----------------------------|
| TITLE | P | 1.1 TITLE | "D" - Director only |
| NAME | DOUG HARRINGTON | 1.2 NAME | |
| STREET ADDRESS | 2420 CEDARCREST PL | 1.3 STREET ADDRESS | |
| CITY - ST - ZIP | VALRICO FL | 1.4 CITY - ST - ZIP | |
| TITLE | V | 2.1 TITLE | P |
| NAME | ALDREDGE, RAY | 2.2 NAME | JANE HARRINGTON |
| STREET ADDRESS | 11734 FOREST HILLS DR | 2.3 STREET ADDRESS | 2420 CEDARCREST PL |
| CITY - ST - ZIP | TAMPA FL | 2.4 CITY - ST - ZIP | VALRICO, FL. 33594 |
| TITLE | T | 3.1 TITLE | |
| NAME | KOSEK, ROBERT | 3.2 NAME | |
| STREET ADDRESS | 9290 136 WAY N | 3.3 STREET ADDRESS | |
| CITY - ST - ZIP | SEMINOLE FL | 3.4 CITY - ST - ZIP | |
| TITLE | D | 4.1 TITLE | |
| NAME | SHERRY MCKNIGHT | 4.2 NAME | |
| STREET ADDRESS | 124 D LOBLOLLY CT | 4.3 STREET ADDRESS | |
| CITY - ST - ZIP | OLDSMAR FL | 4.4 CITY - ST - ZIP | |
| TITLE | SD | 5.1 TITLE | S |
| NAME | WHITSON, JUDI | 5.2 NAME | ANN DAUGHERITY |
| STREET ADDRESS | 4000 42ND ST | 5.3 STREET ADDRESS | 8910 CLUSTER AVE |
| CITY - ST - ZIP | ST PETERSBURG FL | 5.4 CITY - ST - ZIP | TAMPA, FL. 33615 |
| TITLE | D | 6.1 TITLE | D AND V (D/V) |
| NAME | BRADDOCK, SANDY | 6.2 NAME | |
| STREET ADDRESS | 3420 LEMON ST | 6.3 STREET ADDRESS | |
| CITY - ST - ZIP | TAMPA FL | 6.4 CITY - ST - ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert Kossek

4/9/98

(813) 397-3305

CR2E037 (10/97)