2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2007 8:00 am Secretary of State

DOCUMENT # N9300002426 1. Entity Name SUNCOAST INDUSTRIAL PARK PROPERTY OWNERS ASSOCIATION, INC.						•		2007 900	03 034 **	**70.00
1980 S. SUNCOAST BLVD.			Mailing Address 20495 BEALS CHAPEL RD LENOIR CITY, TN 37772 US			.400	148841			
2. Principal Place of Business - No P.O. Box #			3. Mailing Address 3684 N. Corrus Ave			1	IBIBA IMII KBIII BBILL I	I BELLI BERLIT EERITA L		8 8 88]
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.			4192007	Chg-NP	CR2E0	37 (12/06)	
City & State		1/7 _ 1	CRUSTA River FL			FEI Number 59-320				plied For t Applicable
Zip	Country	_Zip	3	Country	5.	Certificate	of Status Desired	×	\$8.75 Add	
	6. Name and Address of C			USH	7.	Name and	Address of New	Registered	<u>-</u>	
STERCHI	GEORGE I			Name	أعتمو	F. US	llans	JR		
1000 0 0011001101 0210					Address (P.O. Box Number is Not Acceptable)					
HOMOSAS	SSA, FL 34448			3	684	N. C.	trus F	lue		
	1	1		City C	rusta	<u>1 D</u>	nier.	Fl	Zip Code	ໍເລ ຊ
	named entity submits this state ions of registered agent.	ment for the purpo	se of changing its regi	istered office or	registered a	gent, or bo	h, in the State of	Florida. I am	familiar with,	and accept
the obligati	Johns of registered agent.	U								
SIGNATURE .	Signature, typed or printed name of egiste	Wille	market					ىد-4	0-07	
	signature, typed or printed hame divegiste	ered agent and title if appli	cable. / (NOTE: Reg	gistered Agent signetu	ire required when	reinstating)		DATE		
	Filling Fee is \$61.25 Due by May 1, 2007	ored agent and title if appli	9. Election Campai Trust Fund Contr	ign Financing	\$5	5.00 May B	le F		k payable to	
10.	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS	and agent and title if appli	9. Election Campai Trust Fund Contr	ign Financing ribution.	\$5 Add	5.00 May B	e F	orlda Depa	IRECTORS IN	10
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	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS	AND DIRECTORS	9. Election Campai Trust Fund Contr	ign Financing ribution.	ADD ADD	i.00 May B ded to Fees httiONS/CH	ANGES TO OFFI	CERS AND D	IRECTORS IN	10
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Indicated on this report or supplied with this filling does not quality for the exemptions contained in Chapter 119, Horida 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 his 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 productions of the corporation of the corporation

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR