2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000005996

FILED Aug 19, 2009 Secretary of State

Entity Name: SUNCOAST MANOR OWNERS' INC.

Current Principal Place of Business:	New Principal Place of Business:
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SUNCOAST MANOR OWNERS C/O COMPREHENSIVE 7490 46TH AVE N

10575 68TH AVE N, STE. B-3

SEMINOLE, FL 33772

ST. PETERSBURG, FL 33709

Current Mailing Address: New Mailing Address:

SUNCOAST MANOR OWNERS C/O COMPREHENSIVE

10575 68TH AVE N, STE. B-3

SEMINOLE, FL 33772

901 N HERCULES AVE

SUITE A

CLEARWATER, FL 33765

FEI Number: 59-2499171 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRAHAM, DONALD 10575 68TH AVE N

STE. B-3

ST PETERSBURG, FL 33772 US

LEADING EDGE CAM 901 N HERCULES AVE

SUITE A

CLEARWATER, FL 33765 US

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: LEADING EDGE CAM 08/19/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DVP () Delete () Change () Addition

JONES, NORMA Name: Name: 6490 46TH AVE N. #307 Address: Address:

City-St-Zip: SAINT PETERSBURG, FL 33709 City-St-Zip:

Title: Title: () Delete () Change () Addition

GREER, PHYLLIS Name: Name: Address: 7490 46TH AVE. #104 Address: City-St-Zip: ST. PETERSBURG, FL 33709 City-St-Zip:

Title: () Delete Title: () Change () Addition

LA CHANCE, JENNIE Name: Name: Address: 7490 46TH AVE N. 108 Address: City-St-Zip: ST. PETERSBURG, FL 33709 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

Name: KRETZER, RALPH Name: Address: 7490 46TH AVE. N. # 208 Address: City-St-Zip: SAINT PETERSBURG, FL 33709 City-St-Zip:

Title: DS () Delete Title: () Change () Addition

KUHAR, DOUGLAS Name: Name: 7490 46TH AVE. N #113 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33709 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BEN COMMONS MGR 08/19/2009