

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000006080

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** SUNCOAST FOOTBALL COACHES ASSOCIATION OF PINELLAS COUNTY, INC.

**Current Principal Place of Business:**

1300 SILVER EAGLE DR.  
TARPON SPRINGS, FL 34688

**New Principal Place of Business:**

**Current Mailing Address:**

1300 SILVER EAGLE DR.  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

**FEI Number:** 65-0616588

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HUDSON, ROBERT  
1300 SILVER EAGLE DR.  
TARPON SPRINGS, FL 34688 US

**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: P  
Name: HUDSON, ROBERT  
Address: 4808 YELLOWSTONE DR.  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP  
Name: FABRIZIO, JOE  
Address: 259 MADEIRA CIRCLE  
City-St-Zip: TIERRE VERDE, FL 33715

Title: T  
Name: ROPER, SAM  
Address: 704 WILDING OAK CT.  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S  
Name: HAYFORD, PHIL  
Address: 5101 1ST N.E.  
City-St-Zip: SAINT PETERSBURG, FL 33703

I hereby 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 all other like empowered.

**SIGNATURE:** SAM ROPER

TREA

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date