2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000003096

Entity Name: SUNCOASTERS OF ST. PETERSBURG, INC.

FILED Jan 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

33 6TH ST., SOUTH SUITE 101 663 SIXTH AVE SOUTH ST PETERSBURG, FL 33701 ST PETERSBURG, FL 33701

Current Mailing Address: New Mailing Address:

33 6TH ST., SOUTH SUITE 101 P.O. BOX 17031

ST PETERSBURG, FL 33701 ST PETERSBURG, FL 33731

FEI Number: 59-0830257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ENGLANDER & FISCHER, P.A.

5959 CENTRAL AVE, SUITE 201

ST PETERSBURG, FL 33710 US

HOSMER, LANE

663 SIXTH AVE SOUTH

ST. PETERSBURG, FL 33701

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: LANE HOSMER 01/25/2005

LANE HOSMER 01/25/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 NIESER, DICK
 Name:
 MOMBERG, JOEL

 Address:
 150 2ND AVE. N., SUITE 910
 Address:
 801 6TH STREET S

City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33701

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

 Name:
 LITTLEJOHN, MARILYN
 Name:

 Address:
 880 CARILLON PKWY 32E
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33716
 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition Name: MAHAFFEY, MARK T Name: GREENE, MARCUS

Address: 3700 POMPANO DRIVE S.E. Address: 111 2ND AVE NE

City-St-Zip: ST. PETERSBURG, FL 33705 City-St-Zip: ST. PETERSBURG, FL 33701

Name: JONES, DONALD Name: WILKINSON, JILL

Address: 506 17TH AVENUE, N.E. Address: 10901-A ROOSEVELT BLVD, STE 100A

City-St-Zip: ST PETERSBURG, FL 33704 City-St-Zip: ST PETERSBURG, FL 33716

Title: VD () Delete Title: SEC (X) Change () Addition Name: ROMIG, LEE F Name: OWENS, BETSY

 Address:
 634 SECOND AVE S.
 Address:
 10100 9TH STREET N

 City-St-Zip:
 ST. PETERSBURG, FL 33701
 City-St-Zip:
 ST. PETERSBURG, FL 33716

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

Name: GREENE, MARCUS Name: GOFORTH, STEPHANIE
Address: 100 N. TAMPA STREET, SUITE 4100 Address: P.O. BOX 15507

 Address:
 100 N. TAMPA STREET, SUITE 4100
 Address:
 P.O. BOX 15507

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:
 ST. PETERSBURG, FL 33733

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: JOEL MOMBERG P 01/25/2005