

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 27 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N96000000269 (8)**

1. Corporation Name

SUNCOAST REGIONAL SCHOOL-TO-WORK CONSORTIUM, INC

Principal Place of Business

**1803 NORTHGATE BLVD.
SARASOTA FL 34234**

Mailing Address

**1803 NORTHGATE BLVD.
SARASOTA FL 34234-2143**



3. Date Incorporated or Qualified
01/17/1996

3a. Date of Last Report

2. Principal Place of Business

21 1929 Northgate Blvd.

2a. Mailing Address

26 1929 Northgate Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Sarasota, FL

City & State

28 Sarasota, FL

Zip

24 34234

Country

25 USA

Zip

29 34234

Country

30 USA

9. Name and Address of Current Registered Agent

**NAJMY, JOSEPH L
1205 MANATEE AVENUE W.
BRADENTON FL 34205**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1608, 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]

3/10/97

Signature typed or printed name of registered agent and title if a director

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	MD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Mary Helen Kress	
1.3 STREET ADDRESS	1003 8th Ave. W	
1.4 CITY - ST - ZIP	Bradenton, FL 34205	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Shirley Stacey	
2.3 STREET ADDRESS	1960 Landings Blv.	
2.4 CITY - ST - ZIP	Sarasota, FL 34239	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Deanna Paris	
3.3 STREET ADDRESS	215 Manatee Ave. W.	
3.4 CITY - ST - ZIP	Bradenton, FL 34205	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	June Barber	
4.3 STREET ADDRESS	5406 26th Street W	
4.4 CITY - ST - ZIP	Bradenton, FL 34207	
5.1 TITLE	MD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Nancy Curry	
5.3 STREET ADDRESS	1929 Northgate Blvd.	
5.4 CITY - ST - ZIP	Sarasota, FL 34234	
6.1 TITLE	C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Donna Burdett	
6.3 STREET ADDRESS	3000 69th Street E.	
6.4 CITY - ST - ZIP	Palmetto, FL 34221	

14. I do 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: *Mary Helen Kress*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/97

941-747-5323

Date

Daytime Phone # **0063120**

CR2E037 (9/96)