

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 04, 2001 08:00 AM**
Secretary of State**DOCUMENT # N96000000269****1. Entity Name**
SUNCOAST REGIONAL YOUTH CONSORTIUM, INCORPORATED**Principal Place of Business**
1844 17TH ST
SARASOTA FL 34234 US**Mailing Address**
1844 17TH ST
SARASOTA FL 34234 US**2. Principal Place of Business**
1750 17TH STREET**3. Mailing Address**
1750 17TH STREET**Suite, Apt. #, etc.**
BUILDING J-2**Suite, Apt. #, etc.**
BUILDING J-2**City & State**
SARASOTA FL**City & State**
SARASOTA FL**Zip**
34234**Country**
US**Zip**
34234**Country**
US**4. FEI Number**
65-0690833**Applied For**
Not Applicable**5. Certificate of Status Desired** ☒ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**BAYLIS KATHLEEN**
148 DAVINCI DR
NOKOMIS FL 34275 US**7. Name and Address of New Registered Agent****Name**
EPPARD RENEE
Street Address (P.O. Box Number is Not Acceptable)
2000 WEBBER STREET
City
SARASOTA FL **Zip Code**
34239**8. 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 RENEE' EPPARD****04/04/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing**
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees**Make Check Payable to**
Department of State**10. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
C	BAYLIS KATHLEEN	148 DAVINCI DR	NOKOMIS FL 34275	<input checked="" type="checkbox"/>
MD	NEWTON TONY	1844 17TH ST	SARASOTA FL 34234	<input checked="" type="checkbox"/>
D	DAVENPORT TOM DR	5840 26TH STREET W	BRADENTON FL 34207	<input type="checkbox"/>
D	PARIS DEANNA	215 MANATEE AVE W	BRADENTON FL	<input type="checkbox"/>
D	METHENY DEBORRAH	1960 LANDINGS BLVD	SARASOTA FL 34239	<input type="checkbox"/>
MD	KRESS MARY HELEN	1003 8 AVE W	BRADENTON FL	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
D	EPPARD RENEE'	2000 WEBBER STREET	SARASOTA FL 34239	<input checked="" type="checkbox"/>	<input type="checkbox"/>
M	ROBINSON MARTHA	4101 11TH AVENUE EAST	BRADENTON FL 34208	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	METHENY DEBORRAH	1960 LANDINGS BLVD	SARASOTA FL 34239	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	KRESS MARY HELEN	1750 17TH STREET, BUILDING J-2	SARASOTA FL 34234	<input checked="" type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida 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 this 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 like empowered.**SIGNATURE: Martha Robinson****M****04/04/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)