

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003148

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: SUNCOAST BLUES SOCIETY, INC.

**Current Principal Place of Business:**

8913 SHELDONWEST DR  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 4232  
TAMPA, FL 33677

**New Mailing Address:**

FEI Number: 59-3514378

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLETT, GEORGE  
8913 SHELDONWEST DR  
TAMPA, FL 33626 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 ( ) Delete  
Name: WILLETT, GEORGE  
Address: 8913 SHELDONWEST DR  
City-St-Zip: TAMPA, FL 33626

Title: V ( ) Delete  
Name: PRESS IV, THOMAS C  
Address: 5201 92ND TERRACE  
City-St-Zip: PINELLAS PARK, FL 33782

Title: TS ( ) Delete  
Name: PILLAR, JOANN  
Address: 2633 46TH TERR N  
City-St-Zip: SAINT PETERSBURG, FL 33714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JOANN PILLAR

TS

04/07/2009

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

\_\_\_\_\_  
Date