

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005207

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: SUNCOAST SWING GANG, INC.

**Current Principal Place of Business:**

13902 CHERRY CREEK DR  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

13902 CHERRY CREEK DR  
TAMPA, FL 33618

**New Mailing Address:**

FEI Number: 59-3630374

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BERRY, DIANE  
13902 CHERRY CREEK DR  
TAMPA, FL 33618 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/D ( ) Delete  
Name: CARSON, BERRY  
Address: 13902 CHERRY CREEK DR  
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete  
Name: JOHNS, FRAN  
Address: 9216 HOLLY RIDGE PLACE  
City-St-Zip: TAMPA, FL 33637

Title: T/D ( ) Delete  
Name: BERRY, DIANE  
Address: 13902 CHERRY CREEK DR  
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete  
Name: JERVEY, DAVE  
Address: 9607 EASTFIELD ROAD  
City-St-Zip: THONOTOSASSA, FL 33592

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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:

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

Title: D ( ) Change (X) Addition  
Name: WILLIAMS, KEITH  
Address: 9461 PARK LAKE DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782

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: DIANE BERRY

T/D

04/16/2009

Electronic Signature of Signing Officer or Director

Date