

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

04-07-2002 90075 024 ***150.00

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1. Entity Name

SUNCOAST FINANCIAL SYSTEMS, INC.

Principal Place of Business

**5537 SHELDON ROAD S
N
TAMPA FL 33615**

Mailing Address

**5537 SHELDON ROAD S
N
TAMPA FL 33615**

00000001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**6820 SHELDON ROAD
Suite, Apt. #, etc.
A1**

3. Mailing Address

**6820 SHELDON RD
Suite, Apt. #, etc.
A1**

City & State

TAMPA FL

City & State

TAMPA, FL

4. FEI Number

59-3627549

Applied For

Not Applicable

Zip

33615

Country

USA

Zip

33615

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BALLENTINE, JUDY
9108 NILE DRIVE
NEW PORT RICHEY FL 34655**

7. Name and Address of New Registered Agent

**RONALD LICHTE
5412 PINE BAY DR
TAMPA FL 33625**

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 **Ronald S. Lichte**

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

(NOTE: Registered Agent signature required when reinstating)

3-29-02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	LICHTE, RONALD G	
STREET ADDRESS	6504 REEF CIRCLE	
CITY-ST-ZIP	TAMPA FL 33625	
TITLE	D	☒ Delete
NAME	BALLENTINE, WILLIAM G	
STREET ADDRESS	9108 NILE DRIVE	
CITY-ST-ZIP	NEW PORT RICHEY FL 34655	
TITLE	DS	☒ Delete
NAME	BALLENTINE, JUDY	
STREET ADDRESS	9108 NILE DRIVE	
CITY-ST-ZIP	NEW PORT RICHEY FL 34655	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	RONALD G. LICHTE	☒ Change ☐ Addition
NAME	5412 PINE BAY DR	
STREET ADDRESS	TAMPA FL 33625	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other information empowered.

SIGNATURE: **Ronald S. Lichte**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-02 **813-890-8665**
 Date Daytime Phone #

CR2E034 (9/01)