2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

		20001	404
DOCUMENT#	P0000	H H H H H	49 I
	I OUG		TUI

SUNCOAST MANUFACTURED HOMES, INC.



FILED Sep 10, 2003 8:00 am Secretary of State

09-10-2003 90061 007 ***550.00

Principal Place of Business 3749 CREEK HOLLOW LN MIDDLEBURG FL 32068		Mailing Address 3749 CREEK HOLLOW LI MIDDLEBURG FL 32068	N	
	lace of Business	3. Mailing Address		1 100 HOUR IN COME STALL COME COME STALL COMES THE THE TRANSPORT OF THE PROPERTY OF THE PROPER
Suite, Apt. #, etc.		Suite, Apt. #, etc.	·	CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 59-3635193 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required
	6. Name and Address of Curr	rent Registered Agent		7. Name and Address of New Registered Agent
	, MICHAEL F _{error}		Name Street A	ddress (P.O. Box Number is Not Acceptable)
3749 CREE	K HOLLOW LN		Oli Coli A	Additional to the Acceptable)
* MIDULEBUI	1G FL 32000		City	7 (G) (C)
	. •		City	FL Zip Code
the obligati	ons of registered agent. Signature, typed or printed name of registered a		OTE: Registered Agent signati	registered agent, or both, in the State of Florida. I am familiar with, and accept
After Sep Make Check	LE NOW!!! FEE IS \$550.00 otember 10, 2003 Fee will be \$ Payable to Florida Departmer	nt of State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.	5 OFFICERS A	AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
STREET ADDRESS	WHITFIELD, MICHAEL F 1977 APOPKA DRIVE MIDDLEBURG FL 32068	₩ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Whitfield, Michael F 3749 Creek Hollow Ln. Middleburg FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ·	TITLE NAME STREET ADDRESS CITY-ST-2IP	Change Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME		☐ Delete	NAME STREET ADDRESS	☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Michael F. Whitfield President

9-6-03

(904)705 - 3277