2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P01000002620

1. Entity Name

SUNCOAST UNDERGROUND, INC.

FILED

05 SEP 15 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

50066886

2nd MOORE CR2E034 (5/05)

Principal Place of Business	Mailing Address
208 NORTH MATANZAS BLVD. ST. AUGUSTINE FL 32080 US	208 NORTH MATANZAS BLVD. ST. AUGUSTINE FL 32080 US

2. Principal Place of Business	3. Mailing Address
208 N. MATANZAS BLVD	
Suite, Apt. #, etc.	Suite, Apt. #, etc. SAME
City & State: ST. AUGUSTINE, FL	City & State
Zip: 32080 Country: USA	Zip Country

4. FEI Number 59-3691858 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVID, BRANDT P 208 NORTH MATANZAS BLVD. ST. AUGUSTINE FL 32080	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 9/11/05

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
DUE BY September 7, 2005
Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the $400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is $150.00. ☐

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE S NAME SKOVE, NEAL STREET ADDRESS 1117 MILANO DRIVE CITY-ST-ZIP NAPLES FL 34103	☐ Delete	TITLE S NAME SKOVE, NEAL STREET ADDRESS 10661 REGENT CIRCLE CITY-ST-ZIP NAPLES, FL 34109-1528	☒ Change ☐ Addition
TITLE P NAME BRANDT, DAVID P STREET ADDRESS 208 NORTH MATANZAS BLVD. CITY-ST-ZIP ST. AUGUSTINE FL 32080	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VP NAME RIFE, DANA STREET ADDRESS 65 SURF DRIVE CITY-ST-ZIP ST. AUGUSTINE FL 32080	☐ 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 400059787684 09/20/05--01053--004 **550.00	☐ 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

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.

SIGNATURE: DAVID BRANDT PRESIDENT 9/11/05 904-626-1693

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #