

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000073610

FILED
Apr 27, 2005
Secretary of State

Entity Name: FLORIDA SUNCOAST VACATIONS, INC.

Current Principal Place of Business:

13435 MCCALL RD.
SUITE 4
PORT CHARLOTTE, FL 33981

New Principal Place of Business:

Current Mailing Address:

13435 MCCALL RD.
SUITE 4
PORT CHARLOTTE, FL 33981

New Mailing Address:

FEI Number: 74-3026466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BAKER, GORDON MURRAY A
13435 MCCALL RD.
SUITE 4
PORT CHARLOTTE, FL 33981 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: BAKER, GORDON MURRAY A
Address: 13435 MCCALL ROAD, SUITE 4
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D () Delete
Name: CALLAN, ROBERT
Address: 1777 TAMiami TRAIL - SUITE 400 - BOX 27
City-St-Zip: PORT CHARLOTTE, FL 33948

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

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: T/D () Change (X) Addition
Name: BAKER, JILLIAN
Address: 13435 MCCALL ROAD, SUITE 4
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D () Change (X) Addition
Name: MCGHEE, JOSEPH
Address: 13435 MCCALL ROAD, SUITE 4
City-St-Zip: PORT CHARLOTTE, FL 33948

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GORDON MURRAY A. BAKER

P

04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date