

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90247 048 ***150.00

DOCUMENT # P03000001859

1. Entity Name

SUNCOAST PUBLISHING SERVICES, INC.



Principal Place of Business

2418 CARDWELL WAY
SARASOTA FL 34231

Mailing Address

2418 CARDWELL WAY
SARASOTA FL 34231

2. Principal Place of Business

4411 BEE RIDGE RD.

Suite/Apt. #, etc.

437

City & State

SARASOTA, FL

Zip
34233

Country

SARASOTA

3. Mailing Address

4411 BEE RIDGE RD.

Suite/Apt. #, etc.

437

City & State

SARASOTA, FL

Zip
34233

Country

SARASOTA



MOORE

CR2E034 (11/03)

4. FEI Number

43-1990366

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name

N/A

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

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

10. OFFICERS AND DIRECTORS

TITLE PTD ☒ Delete

NAME MCMILLEN, RODNEY R

STREET ADDRESS 2418 CARDWELL WAY

CITY-ST-ZIP SARASOTA FL 34231

TITLE VSD ☐ Delete

NAME MCMILLEN, JAMES R

STREET ADDRESS 2418 CARDWELL WAY

CITY-ST-ZIP SARASOTA FL 34231

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD, VSD, S-Tres. ☒ Change ☐ Addition

NAME JAMES R. McMillen

STREET ADDRESS 2418 CARDWELL WAY

CITY-ST-ZIP SARASOTA, FL 34231

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-22-04