

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012769

FILED  
Mar 03, 2009  
Secretary of State

Entity Name: SUNCOAST BUILDERS DEVELOPMENT, INC.

## Current Principal Place of Business:

6628 OSTEEN RD  
NEW PORT RICHEY, FL 34653 US

## New Principal Place of Business:

## Current Mailing Address:

6628 OSTEEN ROAD  
NEW PORT RICHEY, FL 34653 US

## New Mailing Address:

6628 OSTEEN RD  
NEW PORT RICHEY, FL 34653 US

FEI Number: 51-0534904

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, LOREN N II  
602 FAYETTE DR S  
SAFETY HARBOR, FL 34695 US

## Name and Address of New Registered Agent:

JONES II, LOREN N  
602 FAYETTE DR S  
SAFETY HARBOR, FL 34695 US

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: LOREN N JONES II

03/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: JONES, LOREN N II  
Address: 602 FAYETTE DR S  
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: VP ( ) Delete  
Name: JONES, BRENT C  
Address: 1806 MOUNTAIN ASH WAY  
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: SECT ( ) Delete  
Name: JONES, LINDA D  
Address: 602 FAYETTE DR S  
City-St-Zip: SAFETY HARBOR, FL 34695 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: JONES, LOREN N II  
Address: 602 FAYETTE DR S  
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: P (X) Change ( ) Addition  
Name: JONES, BRENT C  
Address: 1806 MOUNTAIN ASH WAY  
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LOREN N JONES II

VP

03/03/2009

Electronic Signature of Signing Officer or Director

Date