

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000029435

Entity Name: SUNCOAST COLOURS, INC.

FILED
Mar 25, 2008
Secretary of State

Current Principal Place of Business:

700 APALACHEE DRIVE NORTHEAST
SAINT PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 55159
SAINT PETERSBURG, FL 33732

New Mailing Address:

FEI Number: 20-2420627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOLENDA, JOHN F PRES
700 APALACHEE DR. NE
ST. PETERSBURG, FL 33702 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: PTD () Delete
Name: KOLENDA, JOHN F
Address: 700 APALACHEE DRIVE NORTHEAST
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: SVD () Delete
Name: GREGGO, THOMAS C
Address: 700 APALACHEE DRIVE NORTHEAST
City-St-Zip: SAINT PETERSBURG, FL 33702

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOHN F KOLENDA

PRES

03/25/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date