2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000141451

Entity Name: SUNCOAST CLAIMS, INC.

FILED Apr 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 362 GULF BREEZE PARKWAY, STE. 259 GULF BREEZE, FL 32561 **Current Mailing Address: New Mailing Address:** 362 GULF BREEZE PARKWAY, STE. 259 GULF BREEZE, FL 32561 FEI Number: 90-0251460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HEDDICK, JAMES H 207 S BAYLEN ST PENSACOLA, FL 32502 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: **PRFS** () Change (X) Addition Name: Name: WOOD, DON 3508 PERIWINKLE CT. Address: Address: City-St-Zip: City-St-Zip: BEDFORD, TX 76021 US Title: () Delete Title: () Change (X) Addition WOOD, DON Name: Name: 3508 PERIWINKLE CT. Address: Address: BEDFORD, TX 76021 City-St-Zip: City-St-Zip: Title: () Delete Title: VΡ () Change (X) Addition WOOD, DON Name: Name: 3508 PERIWINKLE CT. Address Address: City-St-Zip: City-St-Zip: BEDFORD, TX 76021 US Title: () Delete Title: () Change (X) Addition WOOD, DON Name: Name: Address: Address: 3508 PERIWINKLE CT. City-St-Zip: City-St-Zip: BEDFORD, TX 76021 US Title: Title: TREA () Change (X) Addition () Delete WOOD, DON Name: Name: 3508 PERIWINKLE CT. Address: Address: City-St-Zip: City-St-Zip: BEDFORD, TX 76021 US

I hereby certify that the information supplied with this filing does not qualify for the 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: | DON WOOD | PRES | 04/05/2006 |
|------------|----------|------|------------|
| | | | |