

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000076079

**FILED**  
**Mar 01, 2010**  
**Secretary of State**

**Entity Name:** SUNCOAST GUN SHOWS, INC.

**Current Principal Place of Business:**

6671 W. INDIANTOWN RD., SUITE 56, #418  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

6671 W. INDIANTOWN RD., SUITE 56, #418  
JUPITER, FL 33458

**New Mailing Address:**

**FEI Number:** 06-1782434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** BARBARA BURKE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** TOWNSEND, LAURIE  
**Address:** 6671 W. INDIANTOWN RD., SUITE 56, #418  
**City-St-Zip:** JUPITER, FL 33458

**Title:** VD  
**Name:** STEGH, JOSEPH  
**Address:** 6671 W. INDIANTOWN RD., SUITE 56, #418  
**City-St-Zip:** JUPITER, FL 33458

**Title:** STD  
**Name:** STEGH, MARTHA  
**Address:** 6671 W. INDIANTOWN RD., SUITE 56, #418  
**City-St-Zip:** JUPITER, FL 33458

I hereby 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 all other like empowered.

**SIGNATURE:** LAURIE TOWNSEND

PD

03/01/2010

Electronic Signature of Signing Officer or Director

Date