## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000087727

US

Entity Name: SUNCOAST KEY REAL ESTATE SERVICES INC.

FILED Sep 14, 2009 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

6601 MEMORIAL HIGHWAY - STE. 213 6601 MEMORIAL HIGHWAY TAMPA, FL 33615

SUITE 213

TAMPA, FL 33615

**Current Mailing Address:** New Mailing Address:

6601 MEMORIAL HIGHWAY 6601 MEMORIAL HIGHWAY - STE. 213 SUITE 213 TAMPA, FL 33615 US

TAMPA, FL 33615 US

FEI Number: 20-5446369 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:

ELLIS, TRISHA L DEUFEL, BETHANN 15842 POND RUSH COURT

8716 COBBLESTONE DRIVE LAND O' LAKES, FL 34638 TAMPA, FL 33615 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: BETHANN DEUFEL 09/14/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

ELLIS, TRISHA L BECK, SUSANNE M Name: Name:

15842 POND RUSH COURT 6601 MEMORIAL HIGHWAY, STE. 213 Address: Address:

TAMPA, FL 33615 US City-St-Zip: LAND O' LAKES, FL 34638 City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition

DEUFEL, BETHANN Name: DEUFEL, BETHANN Name:

6601 MEMORIAL HIGHWAY - STE. 200 - UNIT 13 6601 MEMORIAL HIGHWAY, STE 213 Address: Address:

TAMPA, FL 33615 US TAMPA, FL 33615 US City-St-Zip: City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title:

DEUFEL, ROSEMARIE E Name: DEUFEL, ROSEMARIE E Name:

6601 MEMORIAL HIGHWAY, STE. 213 6601 MEMORIAL HIGHWAY - STE. 200 - UNIT 13 Address: Address

City-St-Zip: TAMPA, FL 33615 US City-St-Zip: TAMPA, FL 33615 US

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: BETHANN DEUFEL 09/14/2009 S