

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000018197

FILED
Mar 30, 2009
Secretary of State

Entity Name: SUNCOAST OPERATIONS, INC.

Current Principal Place of Business:

7214 WESTMORELAND DRIVE
SARASOTA, FL 34243 US

New Principal Place of Business:

3687 TORREY PINES WAY
SARASOTA, FL 34238 US

Current Mailing Address:

7214 WESTMORELAND DRIVE
SARASOTA, FL 34243 US

New Mailing Address:

3687 TORREY PINES WAY
SARASOTA, FL 34238 US

FEI Number: 51-0669076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, DAN K
7214 WESTMORELAND DRIVE
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

THOMPSON, DAN K
3687 TORREY PINES WAY
SARASOTA, FL 34238 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:

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: THOMPSON, DAN K
Address: 7214 WESTMORELAND DRIVE
City-St-Zip: SARASOTA, FL 34243 US

Title: S, D () Delete
Name: THOMPSON, BARBARA H
Address: 7214 WESTMORELAND DRIVE
City-St-Zip: SARASOTA, FL 34243 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: THOMPSON, DAN K
Address: 3687 TORREY PINES WAY
City-St-Zip: SARASOTA, FL 34238 US

Title: S, D (X) Change () Addition
Name: THOMPSON, BARBARA H
Address: 3687 TORREY PINES WAY
City-St-Zip: SARASOTA, FL 34238 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: DAN K THOMPSON

PD

03/30/2009

Electronic Signature of Signing Officer or Director

Date