

FILE NOW: FILING FEE AFTER MAY 1 IS \$55.00

FILED

Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P92000011893 (4)**

1. Corporation Name

FLORIDA SUNCOAST DESIGN AND DEVELOPMENT INC.



Principal Place of Business 820 COLUMBUS DR. E TIERRA VERDE FL 33715 US	Mailing Address P.O. BOX 67266 ST. PETERSBURG FL 33736-7266 US
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3. Date Incorporated or Qualified 12/15/1992	3a. Date of Last Report 05/01/1996
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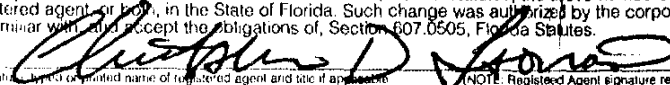
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 59-3159322	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent TSONAS, CHRISTOPHER D 820 COLUMBUS DR. E TIERRA VERDE FL 33715
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10. Name and Address of New Registered Agent 81 Name TSONAS, Christopher D. 82 Street Address (P.O. Box Number is Not Acceptable) 3136 DOMINO DR. 83 HOLIDAY FL. 84 City HOLIDAY FL. 85 Zip Code 34691
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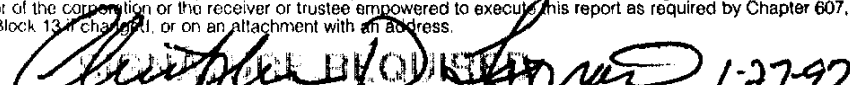
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  DATE **1-27-97**

12. OFFICERS AND DIRECTORS	
TITLE	P ☐ DELETE
NAME	TSONAS, CHRISTOPHER D
STREET ADDRESS	793 COLUMBUS DR. E.
CITY - ST - ZIP	TIERRA VERDE FL
TITLE	VPS ☐ DELETE
NAME	TSONAS, CYNTHIA D
STREET ADDRESS	793 COLUMBUS DR. E.
CITY - ST - ZIP	TIERRA VERDE FL
TITLE	VP ☒ DELETE
NAME	STEWART, RONALD P
STREET ADDRESS	1727 SUNSET DRIVE
CITY - ST - ZIP	TARPOON SPRING FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	P ☒ Change ☐ Addition
1.2 NAME	TSONAS, CHRISTOPHER D.
1.3 STREET ADDRESS	P.O. Box 67266
1.4 CITY - ST - ZIP	ST. PETE Bch FL. 33736
2.1 TITLE	VPS ☒ Change ☐ Addition
2.2 NAME	TSONAS, D. Cynthia
2.3 STREET ADDRESS	P.O. Box 67266
2.4 CITY - ST - ZIP	ST. PETE Bch FL 33736
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  DATE **1-27-97** DAYTIME PHONE # **1-813-867-6776**

CR2E034 (9/96)