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Feb 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P92000011893 (4)**

1. Corporation Name
FLORIDA SUNCOAST DESIGN AND DEVELOPMENT INC.

Principal Place of Business	Mailing Address
820 COLUMBUS DR. E TIERRA VERDE FL 33715 US	P.O. BOX 67266 ST. PETERSBURG FL 33736 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 8325 So AIA	2a. Mailing Address 26 PO Box 8006
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 MELBOURNE Bch FL.	City & State 28 VERO Beach FL,
Zip / Country 24 32951 / 25 US	Zip / Country 29 32963 / 30 US,

3. Date Incorporated or Qualified: 12/15/1992

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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TSONAS, CHRISTOPHER D 3136 DOMINO DR HOLIDAY FL 34691	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

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 Christopher D Tsonas 1-9-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required) DATE

12. OFFICERS AND DIRECTORS			13. OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	PRESIDENT
NAME	TSONAS, CHRISTOPHER D		1.2 NAME	TSONAS, CHRISTOPHER
STREET ADDRESS	P.O. BOX 67266		1.3 STREET ADDRESS	8325 SOUTH HWY AIA
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-ST-ZIP	MELBOURNE BEACH, FLORIDA 32951
TITLE	VPS	☐ DELETE	2.1 TITLE	VICE PRESIDENT
NAME	TSONAS, CYNTHIA		2.2 NAME	TSONAS, CYNTHIA
STREET ADDRESS	P.O. BOX 67266		2.3 STREET ADDRESS	8325 SOUTH HWY AIA
CITY-ST-ZIP	ST. PETERSBURG FL		2.4 CITY-ST-ZIP	MELBOURNE BEACH, FLORIDA 32951
TITLE	VP	☒ DELETE	3.1 TITLE	MAILING ADDRESS-
NAME	STEWART, RONALD P		3.2 NAME	P.O. BOX 8006
STREET ADDRESS	1727 SUNSET DRIVE		3.3 STREET ADDRESS	VERO BEACH, FLORIDA 32963
CITY-ST-ZIP	TARPON SPRING FL		3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

ERS AND DIRECTORS IN 12
Change ☐ Addition
Beach FL 32951
32963
Change ☐ Addition
Beach FL 32951
32963
Change ☐ Addition
Change ☐ Addition
Change ☐ Addition

CR2E034 (10/97)

14. I 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 CHRISTOPHER D TSONAS 1-9-98