

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT (AR)**

DOCUMENT # P94000015769

1. Entity Name

SUNCOAST FILTERS, INC.



**FILED  
Mar 15, 2004 8:00 am  
Secretary of State**

03-15-2004 90044 023 \*\*\*150.00

44017040



MOORE CR2E034 (11/03)

Principal Place of Business <i>New w 7302 JESSIE HARBOR DR Address</i>	Mailing Address P.O. BOX 5971 SARASOTA FL 34277-5971 US
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2. Principal Place of Business <b>1683 EAGLE NEST CT</b>	3. Mailing Address <b>SAME AS ABOVE</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>SARASOTA, FL</b>	City & State
Zip <b>34232-3067</b>	Country <b>SARASOTA</b>
Zip	Country

6. Name and Address of Current Registered Agent  <b>DANIEL L. PREWITT 5777 BENEVA ROAD S. SARASOTA FL 34233</b>	7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

<b>FILE NOW!!! FEE IS \$150.00</b>	<b>After May 1, 2004 Fee will be \$550.00</b>
<b>Make Check Payable to Florida Department of State</b>	

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PT</b> HUSTON, RONALD <i>New w 7302 JESSIE HARBOR DR Address</i>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>1683 EAGLE NEST COURT SARASOTA, FL 34232-3067</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPS</b> HUSTON, PAULA M <i>New w 7302 JESSIE HARBOR DR Address</i>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>1683 EAGLE NEXT COURT SARASOTA, FL 34232-3067</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD W HUSTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Ronald Huston PT*

1/21/04 941-927-8208

Date

Daytime Phone #