

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000093830

1. Entity Name  
IH SUNCOAST HOMES, INC.



**FILED**  
**Feb 27, 2003 8:00 am**  
**Secretary of State**

02-27-2003 90164 002 \*\*\*150.00

Principal Place of Business  
8401 JR MANOR DRIVE  
SUITE 100  
TAMPA FL 33634

Mailing Address  
8401 JR MANOR DRIVE  
SUITE 100  
TAMPA FL 33634



2. Principal Place of Business

3. Mailing Address

6522 Gunn Hwy

6522 Gunn Hwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tampa, FL

Tampa, FL

Zip

Country

Zip

Country

33625

USA

33625

USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3364235

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LYNCH, PAUL  
SHUMAKER LOOP AND KENDRICK  
101 E KENNEDY BLVD STE 2800  
TAMPA FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

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 D  
NAME SUAREZ, JACK D  
STREET ADDRESS 8401 JR MANOR DRIVE, SUITE 100  
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE D  
NAME Suarez, Jack D  
STREET ADDRESS 6522 Gunn Hwy  
CITY-ST-ZIP Tampa, FL 33625 ☒ Change ☐ Addition

TITLE DC  
NAME CLARK, JAMES  
STREET ADDRESS 8401 JR MANOR DR STE 100  
CITY-ST-ZIP TAMPA FL 33634 ☐ Delete

TITLE DCP  
NAME Clark, James R  
STREET ADDRESS 6522 Gunn Hwy  
CITY-ST-ZIP Tampa, FL 33625 ☒ Change ☐ Addition

TITLE DV  
NAME ELLERBEE, MARK  
STREET ADDRESS 8401 TR MANOR DR STE 100  
CITY-ST-ZIP TAMPA FL 33634 ☐ Delete

TITLE DV  
NAME Ellerbee, Mark  
STREET ADDRESS 6522 Gunn Hwy  
CITY-ST-ZIP Tampa, FL 33625 ☒ Change ☐ Addition

TITLE P  
NAME PIZOR, WILLIAM  
STREET ADDRESS 8401 JR MANOR DR. #100  
CITY-ST-ZIP TAMPA FL 33634 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T  
NAME ZOGLER, ANDREW L  
STREET ADDRESS 8401 JR MANOR DRIVE, STE 100  
CITY-ST-ZIP TAMPA FL 33634 ☐ Delete

TITLE T  
NAME Rogler, Andrew L  
STREET ADDRESS 6522 Gunn Hwy  
CITY-ST-ZIP Tampa, FL 33625 ☒ Change ☐ Addition

TITLE S  
NAME LYNCH, PAUL R  
STREET ADDRESS 101 E. KENNEDY BLVD. STE 2800  
CITY-ST-ZIP TAMPA FL 33602 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew L Rogler

2/15/03

Date

813 886 2433

Daytime Phone #

CR2E034 (10/02)