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May 13 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P96000020668 (5)

1. Corporation Name  
SUNCOAST COMPUTER SYSTEMS, INC.  
Systems RPN



Principal Place of Business: 38343 FIFTH AVENUE ZEPHYRHILLS FL 33541  
Mailing Address: 38343 FIFTH AVENUE ZEPHYRHILLS FL 33541-4978

3. Date Incorporated or Qualified: 03/04/1996  
3a. Date of Last Report

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 25, 26, 27, 28, 29, 30  
38424 Fifth Avenue  
Zephyrhills, FL  
33540 USA

4. FEI Number: 59-3362837  
5. Certificate of Status Desired:  Applied For,  Not Applicable  
\$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes,  No

9. Name and Address of Current Registered Agent  
NEAL, RODRICK ROY  
38343 FIFTH AVENUE  
ZEPHYRHILLS FL 33541

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable): 38424 FIFTH AVENUE  
83  
84 City, FL 85 Zip Code: 33540

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

Table with 12 rows for Officers and Directors. Includes columns for Title, Name, Street Address, City-ST-ZIP, and a DELETED checkbox. Handwritten entry for Rodrick R. Neal, President, 38424 5th Ave, Zephyrhills, FL 33541.

Table with 6 rows for Additions/Changes to Officers and Directors in 12. Includes columns for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change and Addition. Includes handwritten signature RPN 5-13-97 and a stamp: 400002188544 -05/22/97--01107--001 \*\*\*173.50

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: \_\_\_\_\_ (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

CR2E034 (9/96)