FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000006980 (1)

SUNCOAST ASSOCIATION MANAGEMENT, INC.

Principal Place of Business Mailing Address C/O WALTER D. SCOTT 155 POINCIANA BLVD. 155 POINCIANA BLVD. DESTIN FL 32541 DESTIN FL 32541

FILED Apr 24 1998 8:00am Secretary of State

C/O WALTER D. SCOTT DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/15/1997 2. Principal Place of Business 2a. Mailing Address FFI Number Applied For 3421232 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes Yes ☐ No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SCOTT, WALTER D 155 **PÕINCIANA** BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **DESTIN FL 32541** 83 84 City 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 Signature, typed or printed name of majstered agent and title if applicable (NOTE Registered Agent a gnature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change **SCOTT, WALTER D** NAME 1.2 NAME 155 POINCIANA BLVD. STREET ADDRESS 1.3 STREET ADDRESS **DESTIN FL 32541** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE SID Change Addition TITLE 2.1 TITLE SCOTT, PATRICIA I NAME 2.2 NAME 155 POINCIANA BLVD. STREET ADDRESS 2.3 STREET ADDRESS DESTIN FL 32541 CITY-\$T-ZIP 2.4 CITY-ST-ZIP □ DELETE Change Addition 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City - St - ZiP DELETE Change Addition 5.1 TiTL€ NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 not an adaptive 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 received or vustee employee to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, in on an advention with an adversarial statutes.

4/12/98

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