

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90183 014 ***150.00

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1. Entity Name
SUNCOAST BAY PROPERTIES, INC.



Principal Place of Business
316 SIGNATURE TERRACE
SAFETY HARBOR FL 34695

Mailing Address
SUNCOAST BAY PROPERTIES
P.O. BOX 1773
PALM HARBOR FL 34682-1773



2. Principal Place of Business

3. Mailing Address

1173 Glenmoor Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

Clearwater, FL

City & State

Clearwater, FL

4. FEI Number

59-3476714

Applied For

Not Applicable

Zip

33764

Country

USA

Zip

33764

Country

USA

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

SPENCER, JAMES T
316 SIGNATURE TERRACE
SAFETY HARBOR FL 34695-5436

Name James T. Spencer

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

1173 Glenmoor Ct.

City Clearwater

FL

Zip Code

33764

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 James T. Spencer

4-1-03

Signature, typed or printed name of registered agent and title (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 P ☐ Delete
NAME SPENCER, JAMES T
STREET ADDRESS 316 SIGNATURE TERR
CITY-ST-ZIP SAFETY HARBOR FL 34695-5436

TITLE P ☒ Change ☐ Addition
NAME James T. Spencer
STREET ADDRESS 1173 Glenmoor Ct.
CITY-ST-ZIP Clearwater, FL 33764

TITLE V ☐ Delete
NAME JACKSON, LARRY A
STREET ADDRESS 2371 GROVE RIDGE DR.
CITY-ST-ZIP PALM HARBOR FL 34683

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

TITLE S ☐ Delete
NAME JACKSON, JILL
STREET ADDRESS 2371 GROVE RIDGE DR.
CITY-ST-ZIP PALM HARBOR FL 34683

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

TITLE D ☐ Delete
NAME SPENCER, JOANN
STREET ADDRESS 316 SIGNATURE TERR
CITY-ST-ZIP SAFETY HARBOR FL 34695-5436

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

James T. Spencer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-03 (727) 785-9889
Date Daytime Phone #

CR2E034 (10/02)