PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS		FILED Sep 01, 1999 8:00 ar Secretary of State 09-01-1999 90005 003 ***550.00		
CUMENT # P poration Name SunCoast			Inc.			
200 South Pinlantation, Fl	e Island Rod 33324	g Address		DO NOT WRITE  3. Date Incorporated or Qualifed  2/13/98  4. FEI Number	E IN THIS SPACE	uplied For
739 McIntosh	Road 26	999 Lincol	n Drive	58-23845	40 No	ot Applicable
te, Apt. #, etc.	27 Si	Sure 100		5. Certifcate of Status Desired	□ \$8.75 / Fee Re	
Sarasota Fl		ty & State	A	Election Campaign Financing     Trust Fund Contribution	□ \$5.00 Added	May Be to Fees
Country 25 25			Country	This corporation owes the currer Personal Property Tax.		EN <sub>o</sub>
9. Name and Addre	ess of Current Register			10. Name and Address of New Re		
T Corporation		•	81 Name	EE K. WARING		
00 South Pine antation, Fl		d	190	ress (P.O. Box Number is Not Acceptable Lincoln ) rive	Suite 100	
arialish, Pl	33324		83			
			84 City Sal	rasota	FL   34	Code 1236
rsuant to the provisions of Sectice or registered agent of both tent. I am familiar with and acc	IC. () KUN	Maryon	, the above-named corporation a Statutes.  Agistered Agent signature require	oration submits this statement for the pion's board of directors. I hereby accept	irpose of changing its the appointment as re	registered gistered
<u> </u>	FFICERS AND DIRECT	ORS	13.	ADDITIONS/CHANGES TO OFFI		
STANLEY 22 Perimote	G. TAYLOR r Conter Eart Sa 30346	, Suite 2219	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		☐ Change	☐ Addition
DIRECTOR CHRIS A. 16308 VIII		☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		☐ Change	Addition
DIRECTOR	(, 33613	☐ DELETE	2.4 CITY-ST-ZIP	<del></del>	☐ Change	Addition
ISSAC H. 1 3280 Howell Atlanta, G	NILLIS, M.D. Mill Road, Suit	- 342	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change	Addition
Atlanta, G	a. 30327	☐ DELETE	3.4. CITY-ST-ZIP		☐ Change	☐ Addition
		_ occur	4. 2 NAME		□ change	
P			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
DN-855		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		☐ Change	☐ Addition
р			5.4 CITY-ST-ZIP			T 4 7 400
		☐ DELETE	6.1 TITLE 6.2 NAME		Change	☐ Addition
			6.3 STREET ADDRESS			

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-11-99 770-287-0996
Date Dayline Phone #

**GNATURE:**