

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000045395

FILED  
Apr 02, 2006  
Secretary of State

Entity Name: SUNCOAST MORTGAGE LOANS, INC.

## Current Principal Place of Business:

1342 COLONIAL BLVD  
BUILDING K SUITE 114  
FORT MYERS, FL 33907

## New Principal Place of Business:

## Current Mailing Address:

1342 COLONIAL BLVD  
BUILDING K SUITE 114  
FORT MYERS, FL 33907

## New Mailing Address:

FEI Number: 62-1780256

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEL BARTO, ANTHONY J  
1514 SW 50TH ST 201  
CAPE CORAL, FL 33914 US

## Name and Address of New Registered Agent:

DEL BARTO, C. J  
1514 SW 50TH ST 201  
CAPE CORAL, FL 33914 US

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.

SIGNATURE: C. J. DEL BARTO

04/02/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: DEL BARTO, ANTHONY J  
Address: 1514 SW 50TH ST. 201  
City-St-Zip: CAPE CORAL, FL 33914

Title: DT ( ) Delete  
Name: DEL BARTO, CHRISTINA M  
Address: 1514 SW 50TH ST. 201  
City-St-Zip: CAPE CORAL, FL 33914

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: DEL BARTO, C. J  
Address: 1514 SW 50TH ST. 201  
City-St-Zip: CAPE CORAL, FL 33914

Title: DT (X) Change ( ) Addition  
Name: DEL BARTO, GLORIA D  
Address: 1514 SW 50TH ST. 201  
City-St-Zip: CAPE CORAL, FL 33914

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. J. DEL BARTO

DP

04/02/2006

Electronic Signature of Signing Officer or Director

Date