


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

FILED  
Apr 29 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		 <b>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</b>																																																									
<b>DOCUMENT #</b> <span style="font-size: 1.2em;">S31966</span>																																																											
<b>1. Corporation Name</b> <span style="font-size: 1.1em;">Phil Grabo Inc- DBA's SunCoast P.G.I. SunCoast Credit Union</span>																																																											
<b>Principal Place of Business</b> <span style="font-size: 1.1em;">3014 5th Ave East Bradenton Florida 34242</span>		<b>Mailing Address</b> <span style="font-size: 1.1em;">5219 Cape Lelyte Sarasota, Florida 74242</span>																																																									
<b>2. Principal Place of Business</b> <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		<b>2a. Mailing Address</b> <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country																																																									
<b>3. Date Incorporated or Qualified</b> <span style="font-size: 1.1em;">On File</span>		<b>3a. Date of Last Report</b> <span style="font-size: 1.1em;">5-1-96</span>																																																									
<b>4. FEI Number</b> <span style="font-size: 1.1em;">59-3055074</span>		<b>Applied For</b> <input type="checkbox"/> Not Applicable																																																									
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>																																																									
<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																																																									
<b>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																											
<b>9. Name and Address of Current Registered Agent</b> <span style="font-size: 1.2em;">Don Harrell (same as last year - on file with 1900 RINGLING BLVD. STATE!) SARASOTA, FL 34236</span>		<b>10. Name and Address of New Registered Agent</b> <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <span style="float: right;"><b>85</b> Zip Code</span>																																																									
<b>11.</b> 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 _____ DATE _____ <small>(Signature typed or printed name of registered agent, and date if applicable) (NOTE: Registered Agent signature required when reinstating)</small>																																																											
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<b>14.</b> 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 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.		<div style="text-align: right; font-size: 1.2em;"> <b>900002161159</b>  <b>-05/01/97--01010--009</b>  <b>***165.00</b> </div>																																																									
<b>SIGNATURE:</b> <span style="font-size: 1.2em;">A. Philip Grabo</span>		<b>4-25-97</b> <span style="float: right;"><b>741-755-7739</b></span>																																																									
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #																																																									

CR2E034 (9/96)