## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V25061

FILED Jul 16, 2009 Secretary of State

Entity Name: SUNCOAST LIFT TRUCK SERVICE, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
207 30TH	AVE. W			
<sup>1</sup> 2 UNIT BRADEN	TON, FL 34205	US		
	/lailing Address	<b>5:</b>	New Mailing Addre	PSS:
	_		J	
P.O. BOX BRADEN	TON, FL 34280	US		
El Number	r: 65-0316432	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	d Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:
(AKLIS, F 400 4TH BRADEN <sup>-</sup> he above	/. WILLIAM ESC REID, VENABLE AVENUE WEST TON, FL 34205 e named entity si e of Florida.	& WITT, P.A. I US	purpose of changing its registe	red office or registered agent, or both,
I LIIC OLAL	.c oi i ioilua.			
SIGNATU	RE:	e Signature of Pegistered Ac	ent	Date
SIGNATU	RE:Electronic	c Signature of Registered Ag		Date
SIGNATU n accordar	RE: Electronionce with s. 607.193	(2)(b), F.S., the corporation did n		Date
SIGNATU n accordar Election Ca	RE: Electronionce with s. 607.193	(2)(b), F.S., the corporation did n Trust Fund Contribution ( ).	ot receive the prior notice.	Date  GES TO OFFICERS AND DIRECTOR
SIGNATU n accordar lection Ca	RE: Electronic nce with s. 607.193 mpaign Financing S AND DIRECT	(2)(b), F.S., the corporation did n Trust Fund Contribution ( ). CORS: Delete < H.	ot receive the prior notice.	
accordar lection Ca DFFICER itle: ame: ddress:	RE: Electronic Electro	(2)(b), F.S., the corporation did n Trust Fund Contribution ( ). FORS: Delete K.H. MEMORIAL HWY 34209 Delete CIA L. MEMORIAL HWY	ot receive the prior notice.  ADDITIONS/CHANGE Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
accordar lection Ca DFFICER itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	RE:  Electronic  more with s. 607.193  mpaign Financing  S AND DIRECT  D () I  THOMAS, FRANI 7611 DESOTO M  BRADENTON, FI  THOMAS, PATRI 7611 DESOTO M  BRADENTON, FI	(2)(b), F.S., the corporation did n Trust Fund Contribution ( ). ORS: Delete < H. MEMORIAL HWY _ 34209 Delete CIA L. MEMORIAL HWY _ 34209 Delete DIA L. DEMORIAL HWY _ 34209 Delete	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA L. THOMAS TREA 07/16/2009