2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2014
Secretary of State
CC2338293621

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Entity Name: SUNCOAST EPILEPSY ASSOCIATION, INCORPORATED

Current Principal Place of Business:

5700 54TH AVENUE NORTH
ST. PETERSBURG, FL 33709

Current Mailing Address:

5700 54TH AVENUE NORTH
ST. PETERSBURG, FL 33709 US

FEI Number: 23-7300934

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DAY, JOHN W
2600 9TH ST. NO.
ST. PETERSBURG, FL 33704 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CD
Name	BELLER, ANN
Address	13150 110TH AVE. NORTH
City-State-Zip:	SEMINOLE FL 33774

Title	SD
Name	BELLER, MARTIN
Address	13150 110TH AVE. NORTH
City-State-Zip:	SEMINOLE FL 33774

Title	TD
Name	LEICHTFUSS, ROBERT
Address	4550 COVE CIRCLE, #806
City-State-Zip:	MADEIRA BEACH FL 33708

Title	M
Name	FINCH, MICHAEL
Address	6282 105TH AVENUE N.
City-State-Zip:	PINELLAS PARK FL 33782

Title	DIRECTOR
Name	ROE, GREG
Address	9851 STATE ROAD 54
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	VD
Name	SKAGGS, RON
Address	1281 DISSTON AVENUE SOUTH
City-State-Zip:	TARPON SPRINGS FL 34689

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL FINCH EXECUTIVE DIRECTOR 01/15/2014

Electronic Signature of Signing Officer/Director Detail — Date