2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 421358

FILED Apr 29, 2004 Secretary of State

Entity Name: SUN TOYOTA, INC. **Current Principal Place of Business: New Principal Place of Business:** 4023 U S 19 P.O. BOX 2105 NEW PORT RCHY, FL 346525946 **Current Mailing Address: New Mailing Address:** 4023 U S 19 P.O. BOX 2105 NEW PORT RCHY, FL 346525946 FEI Number: 59-1457344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHANSEN, LELENAD D JOHANSEN, LELAND D 4023 US HWY 19 4023 US HWY 19 NEW PORT RCHY, FL 34652 US NEW PORT RCHY, FL 34652 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: JOHANSEN, LELAND D 04/29/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CADWELL, JEFFREY P. Name: Name: 4023 US HWY 19 Address: Address: City-St-Zip: NEW PORT RCHY, FL 00000, 34652 City-St-Zip: Title: Title: () Delete () Change () Addition CADWELL, CONNIE, Name: Name: Address: 4023 US HWY 19 Address: NEW PORT RCHY, FL 00000, 34652 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition CADWELL, CONNIE, Name: Name: 4023 US HWY 19 Address: Address: City-St-Zip: NEW PORT RCHY, FL 00000, 34652 City-St-Zip: Title: () Delete Title: () Change () Addition CADWELL, JEFFREY P, Name: Name: Address: 4023 US HWY 19 Address: City-St-Zip: NEW PORT RCHY, FL 00000, 34652 City-St-Zip: Title: Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: CADWELL, JEFFREY P 04/29/2004

JOHANSEN, LELAND DWANE

NEW PORT RICHEY, FL 34652

4023 US HWY 19

Name:

Address:

City-St-Zip: