2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)

DOCUMENT # 770082
1. Entity Name
SUNSHINE SAFETY COUNCIL, INC.

Principal Place of Business
150 NO BEACH STR
DAYTONA BCH FL 32114
US

Mailing Address
150 NO BEACH STR
DAYTONA BCH FL 32114
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

4. FEI Number
59-2372470

5. Certificate of Status Desired
☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MOUNTCASTLE, ARTHUR
150 N. BEACH STREET
DAYTONA BEACH FL 32114

7. Name and Address of New Registered Agent

8. 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. I am familiar with, and accept the obligations of registered agent.

9. Election Campaign Finance
Trust Fund Contribution.
☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

<table>
<thead>
<tr>
<th>TITLE</th>
<th>NAME</th>
<th>STREET ADDRESS</th>
<th>CITY-ST-ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>C</td>
<td>GREENE, BARBARA</td>
<td>1100 W. GRANADA BLVD.</td>
<td>ORMOND BEACH FL 32174</td>
</tr>
<tr>
<td>V</td>
<td>MISKELL, JOHN</td>
<td>501 N. ORCHARD ST.</td>
<td>ORMOND BEACH FL 32174</td>
</tr>
<tr>
<td>T</td>
<td>GREENE, BARBARA</td>
<td>1100 W. GRANADA BLVD</td>
<td>ORMOND BEACH FL 32174</td>
</tr>
<tr>
<td>D</td>
<td>BUTER, BILL</td>
<td>71 HARGROVE GRADE</td>
<td>PALM COAST FL 32137</td>
</tr>
<tr>
<td>D</td>
<td>DUMAS, DARLA</td>
<td>208 N BRIGHTON DR</td>
<td>PORT ORANGE FL 32127</td>
</tr>
<tr>
<td>S</td>
<td>MOUNTCASTLE, ARTHUR, M.</td>
<td>1341 GOLFVIEW DRIVE</td>
<td>DAYTONA BEACH FL</td>
</tr>
</tbody>
</table>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Charge ☐ Addition

☐ Charge ☐ Addition

☐ Charge ☐ Addition

☐ Charge ☐ Addition

☐ Charge ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address with an otherwise empowered.

SIGNATURE: [Signature]

FILED
Mar 19, 2008 8:00 am
Secretary of State
03-19-2008 90020 026 ****6125

1st MOORE CR2E037 (10/07)

FILE NOW: FEE IS $61.25
Due By May 1, 2008