

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008972

FILED
Apr 30, 2009
Secretary of State

Entity Name: SUNSHINE INDEPENDENT ATHLETIC ASSOCIATION INC.

Current Principal Place of Business:

8624 A.D. MIMS RD.
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

8624 A.D. MIMS RD.
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 38-3792201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATKINS, TONY
8624 A.D. MIMS RD.
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ATKINS, TONY
Address: 8624 A.D. MIMS RD.
City-St-Zip: ORLANDO, FL 32818

Title: VD () Delete
Name: LEONARDO, KEITH
Address: 8624 A.D. MIMS RD.
City-St-Zip: ORLANDO, FL 32818

Title: STD () Delete
Name: FULLBRIGHT, RODNEY
Address: 8624 A.D. MIMS RD.
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: JONES, RICHARD
Address: 8624 A.D. MIMS RD.
City-St-Zip: ORLANDO, FL 32818

Title: STD (X) Change () Addition
Name: ATKINS, SABRINA
Address: 8624 A.D. MIMS RD.
City-St-Zip: ORLANDO, FL 32818

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

SIGNATURE: TONY ATKINS

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date