

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000432

FILED
Jan 06, 2009
Secretary of State

Entity Name: SUNSHINE STATE ONE-CALL OF FLORIDA, INC.

Current Principal Place of Business:

11 PLANTATION RD.
DEBARY, FL 32713 US

New Principal Place of Business:

Current Mailing Address:

11 PLANTATION RD.
DEBARY, FL 32713 US

New Mailing Address:

FEI Number: 65-0445791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWEET, MARK ED
11 PLANTATION RD.
DEBARY, FL 32713 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: CD () Delete
Name: MISICKA, EDWARD
Address: 3767 ALLAMERICAN BLVD
City-St-Zip: ORLANDO, FL 32810

Title: TD () Delete
Name: CONCEPCION, HAROLD
Address: 3575 S LEJUEUNE RD
City-St-Zip: MIAMI, FL 33146

Title: VD () Delete
Name: GAULDIN, MICKEY
Address: 15720 US HWY 441
City-St-Zip: EUSTIS, FL 327266561

Title: MD () Delete
Name: SWEET, MARK
Address: 11 PLATATION RD.
City-St-Zip: DEBARY, FL 32713

Title: SD () Delete
Name: JONES, LORENZO
Address: 2200 E SLIGH AVE
City-St-Zip: TAMPA, FL 33601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: MARK SWEET

ED

01/06/2009

Electronic Signature of Signing Officer or Director

Date