

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000079339

FILED
Oct 05, 2005
Secretary of State

Entity Name: SUNSHINE SECURITY INSURANCE AGENCY, INC.

Current Principal Place of Business:

1325 SNELL ISLE BLVD STE 211
ST PETERSBURG, FL 33704

New Principal Place of Business:

805 EXECUTIVE CENTER DRIVE WEST
300
ST PETERSBURG, FL 33702

Current Mailing Address:

1325 SNELL ISLE BLVD STE 211
ST PETERSBURG, FL 33704

New Mailing Address:

805 EXECUTIVE CENTER DRIVE WEST
300
ST PETERSBURG, FL 33702

FEI Number: 11-3644072 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MILKEY, KEVIN
1325 SNELL ISLE BLVD STE 211
ST PETERSBURG, FL 33704 US

Name and Address of New Registered Agent:

MILKEY, KEVIN
805 EXECUTIVE CENTER DRIVE WEST
300
ST PETERSBURG, FL 33702 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: KEVIN MILKEY 10/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCT () Delete
Name: AUER, JOHN F
Address: 1325 SNELL ISLE BLVD
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: VS () Delete
Name: MILKEY, KEVIN R
Address: 605 14TH AVENUE N.E.
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCT (X) Change () Addition
Name: AUER, JOHN F
Address: 2143 BAYOU GRAND N.
City-St-Zip: SAINT PETERSBURG, FL 33703

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

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.

SIGNATURE: KEVIN MILKEY VS 10/05/2005

Electronic Signature of Signing Officer or Director Date