2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

BRADENTON FL

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

6331 5TH STREET CIRCLE EAST

P98000082760 **DOCUMENT #**

1. Entity Name

Principal Place of Business

BRADENTON FL

6331 5TH STREET CIRCLE EAST

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

SUNSHINE COMPUTER CONSULTING, INC.

Country

6. Name and Address of Current Registered Agent



FILED Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90180 021 ***150.00

22003430

☐ CHECK HERE IF MAKING	CHANGES
4. FEI Number 65-0865895	Applied For
00-0000000	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional

HATTAWAY, HAROLD E JR 6331 5TH STREET CIRCLE EAST **BRADENTON FL**

7. Name and Address of New Registered Agent							
_Name	• •	,	-	٠	1612		
Street Addres	s (P.O. Bo	x Number	is Not	Acceptab	le)		
City						 1	Zip Code
City						FL	2p 0000

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

Country

Harolo E. HATTAWAY Jr.

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Fee Required

10.	OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Hattaway, Harold e Jr 6331 5th St. Cir. e. Bradenton Fl	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HATTAWAY, SUSAN M 6331 5TH ST. CIR. E. BRADENTON FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition		
- TITLE NAME- STREET ADDRESS CITY-ST-ZIP	ST FRANKART, LESLYE A 6331 5TH ST. CIR. E. BRADENTON FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition		

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE:

Harold F. Hattaway Jr 2-2-03 941 7980342