**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**
Feb 28, 2007 8:00 am
Secretary of State
02-28-2007 90015 039 ****70.00

**DOCUMENT # 770082**

**SUNSHINE SAFETY COUNCIL, INC.**

1. **Entity Name**
   - SUNSHINE SAFETY COUNCIL, INC.

2. **Principal Place of Business**
   - 150 NO BEACH STR
   - DAYTONA BCH FL 32114
   - US

3. **Mailing Address**
   - 150 NO BEACH STR
   - DAYTONA BCH FL 32114
   - US

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**
   - Name:
   - Street Address (P.O. Box Number is Not Acceptable)
   - City, FL
   - Zip Code

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.

**SIGNATURE:**

**FILE NOW: FEE IS $61.25**
Due By May 1, 2007

**9. Election Campaign Financing 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-STATE-ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>C</td>
<td>LEGG, AL</td>
<td>PO BOX 277</td>
<td>ORMOND BEACH FL 32175</td>
</tr>
<tr>
<td>VC</td>
<td>JENNISON, DAVID</td>
<td>1100 JIMMY ANN DR</td>
<td>DAYTONA BEACH FL 32114</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>CRISP, LINDA</td>
<td>PO BOX 10605</td>
<td>DAYTONA BEACH FL 32120</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**

<table>
<thead>
<tr>
<th>TITLE</th>
<th>NAME</th>
<th>STREET ADDRESS</th>
<th>CITY-STATE-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>VC</td>
<td>Miskell, John</td>
<td>501 N. Orchard St.</td>
<td>Ormond Beach FL 32174</td>
</tr>
<tr>
<td>T</td>
<td>Fenton, Sarah</td>
<td>1055 Saxon Blvd.</td>
<td>Orange City FL 32763</td>
</tr>
<tr>
<td>D</td>
<td>Butler, Bill</td>
<td>71 Har Grove 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</td>
<td>1341 Golfview Drive</td>
<td>Daytona Beach FL 32114</td>
</tr>
</tbody>
</table>

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

**SIGNATURE:**

**Daytime Phone #:**