

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 394116

1. Entity Name  
SUNPRESS, INC.



Principal Place of Business  
13032 HIGHWAY 301, SOUTH  
DADE CITY FL 33525  
US

Mailing Address  
13032 HIGHWAY 301, SOUTH  
DADE CITY FL 33525  
US

**FILED**  
**Apr 16, 2003 8:00 am**  
**Secretary of State**

04-16-2003 90278 034 \*\*\*158.75



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1380369

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MATTHEW, WILLIAM L  
129 BUENA VISTA DRIVE  
DUNEDIN FL 34698

Name  
G. Michael Mackenzie  
Street Address (P.O. Box Number is Not Acceptable)  
1027 Broadway  
Suite A  
City  
Dunedin FL Zip Code  
34698

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 *G. Michael Mackenzie*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/9/2003

**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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
MATTHEW, WILLIAM L.  
129 BUENA VISTA DRIVE  
DUNEDIN FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Pres/Dir  
Luther C. Stinnett  
77 Mosswood Ln  
Bristol, VA 24201 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MATTHEW, TIMOTHY O  
13714 WALBROOKE DRIVE  
TAMPA FL 33624 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V/PRES. - DIR.  
G. Michael Mackenzie  
1027 Broadway, Suite A  
Dunedin, FL 34698 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
STORY, III, CLEMENT  
115 W. MAIN ST  
LAFAYETTE LA ☐ 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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

12. I hereby certify that the information supplied with this filing 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 like empowered.

SIGNATURE: *Luther C. Stinnett*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/2003

Date

1-352-567-5639

Daytime Phone #

CR2E034 (10/02)

9908890