## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 421358** 

Entity Name: SUN AUTOMOTIVE, INC.

JOHANSEN, LÉLAND DWANE

NEW PORT RICHEY, FL 34652

4023 US HWY 19

Name:

Address:

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
4023 U S 19 P.O. BOX 2105 NEW PORT RCHY, FL 346525946				4023 U S 19 NEW PORT RCHY, FL 346525946		
Current Mailing Address:				New Mailing Address:		
4023 U S 1 P.O. BOX : NEW POR	2105	_ 346525946		23 U S 19 W PORT RCHY, FL	346525946	
FEI Number:	59-1457344	FEI Number Applied For	( ) FEI Number	Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
4023 US H NEW POR The above	T RCHY, Fl named enti e of Florida.	_ 34652 US	or the purpose of cha	anging its registered	office or registered agent, or both,	
Electronic Signature of Registered Agent				Date		
Election Car	npaign Finan	eing Trust Fund Contribution (	).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P CADWELL, 4023 US HV NEW PORT			,	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	4023 US HV	( ) Delete CONSTANCE /Y 19 RICHEY, FL 34652		,	) Change ()Addition	
Title <sup>.</sup>	V	( ) Delete	Title	. (	) Change ( ) Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JEFFREY CADWELL P 04/30/2007