

2006 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90220 011 ***150.00

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04052006 Chg-P CR2E034 (11/05)

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| DOCUMENT # 450170 | |  | |
| 1. Entity Name NOSUN ENGINEERING SALES, INC. | | | |
| Principal Place of Business 340 WEST BRANNEN RD. P O BOX 5347 LAKELAND, FL 33813 | | Mailing Address 340 WEST BRANNEN RD. P O BOX 5347 LAKELAND, FL 33813 | |
| 2. Principal Place of Business 1433 S. Ft. Harrison Ave. Suite, Apt. #, etc. Suites E+F City & State Clearwater, FL Zip 33756 Country U.S.A. | | 3. Mailing Address 1433 S. Ft. Harrison Ave. Suite, Apt. #, etc. Suites E+F City & State Clearwater, FL Zip 33756 Country U.S.A. | |
| 4. FEI Number 59-1536807 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent FORTNER, W. RAY 1510 COMMERCIAL PARK DR LAKELAND, FL 33801 | | 7. Name and Address of New Registered Agent Name Linda J. Parks Street Address (P.O. Box Number is Not Acceptable) 171 Marina Del Rey Ct. City Clearwater FL Zip Code 33767 | |
| 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 <u>Linda J. Parks</u> <u>Linda J. Parks</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 | T NOSUN, MARY ANN 5175 TERRY LANE LAKELAND, FL <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | President Parks, Linda J. 171 Marina Del Rey Ct. Clearwater, FL 33767 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D NOSUN, ROBERT D 5175 TERRY LANE LAKELAND, FL <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D NOSUN, MARY ANN 5175 TERRY LANE LAKELAND, FL <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Linda J. Parks</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | 4/24/06 727-441-3410 Date Daytime Phone # | |