

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751494

FILED
Apr 10, 2009
Secretary of State

Entity Name: SUNRUNNERS OF VERO BEACH, INC.

Current Principal Place of Business:

3700 GABLE DR
#1
VERO BEACH, FL 32963 US

Current Mailing Address:

P.O BOX 3032
VERO BEACH, FL 329643032 US

New Principal Place of Business:

3200 EAGLE DR, 1
#1
VERO BEACH, FL 32963 US

New Mailing Address:

FEI Number: 59-2069274 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, ROBERT C.
6012 DEBORAH WAY
FORT PIERCE, FL 34951 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: DALY, TOM
Address: 3200 EAGLE DR., #1
City-St-Zip: VERO BEACH, FL 32963

Title: PD () Delete
Name: SHAFER, HELEN
Address: 3055-10TH PKWY
City-St-Zip: VERO BEACH, FL 32965

Title: VD () Delete
Name: GLABB, SHERRY
Address: 205 LIVE OAK DR
City-St-Zip: VERO BCH, FL 32963 US

Title: VD () Delete
Name: RADFORD, PATTI
Address: 340 8TH TERRACE
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: TOM DALY

TD

04/10/2009

Electronic Signature of Signing Officer or Director

Date