2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755458

Entity Name: SUN DOME, INC.

FILED Apr 03, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4202 FOWLER AVE., ADM 250 STEVEN D. PREVAUX TAMPA, FL 33620 US TAMPA, FL 33620 US

Current Mailing Address: New Mailing Address:

4202 FOWLER AVE., ADM 250 STEVEN D. PREVAUX TAMPA, FL 33620 US

4202 FOWLER AVE., ADM 250 TAMPA, FL 33620 US

FEI Number: 59-2051855 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:

PREVAUX, STEVEN D MR
4202 FOWLER AVENUE
4DM. 250
TAMPA, FL 33620 US
GLASER, SCOTT MR
4202 FOWLER AVENUE
ADM. 250
TAMPA, FL 33620 US
TAMPA, FL 33620 US

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: SCOTT GLASER 04/03/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PRES (X) Change () Addition
Name: OSCHER, STEVEN S MR
Address: 201 N. ERANKLIN ST. SLITE 2150

Address: 201 N. FRANKLIN ST. SUITE 3150 Address: 201 N. FRANKLIN ST. SUITE 3150

City-St-Zip: TAMPA, FL 33602 US City-St-Zip: TAMPA, FL 33602 US

Title: SD () Delete Title: VP (X) Change () Addition
Name: LOMBARDI, GINA M MS Name: HAROLD, ASTORQUIZA MR.

Address: 4202 FOWLER AVE., ADM 200 Address: 4890 W. KENNEDY BLVD., SUITE 700

City-St-Zip: TAMPA, FL 33620 US City-St-Zip: TAMPA, FL 33609 US

 Title:
 TD
 () Delete
 Title:
 TR
 (X) Change () Addition

 Name:
 BROWN, RICHARD L MR
 Name:
 BROWN, RICHARD L MR

 Address:
 1810 S. MACDILL AVE, SUITE 4
 Address:
 1810 S. MACDILL AVE, SUITE 4

City-St-Zip: TAMPA, FL 33629 US City-St-Zip: TAMPA, FL 33629 US

Title: VPD (X) Delete Title: () Change () Addition Name: ASTORQUIZA, HAROLD MR Name:

Name:ASTORQUIZA, HAROLD MRName:Address:15303 AMBERLY DRIVE, SUITE CAddress:City-St-Zip:TAMPA, FL 33647 USCity-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: STEVEN S. OSCHER PRES 04/03/2008