

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765157

FILED
Mar 23, 2004
Secretary of State

Entity Name: SUNSYSTEM DEVELOPMENT CORPORATION

Current Principal Place of Business:

111 N. ORLANOD AVE.
WINTER PARK, FL 327893675

New Principal Place of Business:

Current Mailing Address:

111 N. ORLANOD AVE.
WINTER PARK, FL 327893675

New Mailing Address:

FEI Number: 59-2219301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIMBLE, TAMARA L
111 N. ORLANDO AVE.
WINTER PARK, FL 327893675 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: DVAS () Delete
Name: JERNIGAN, DONALD L
Address: 2400 BEDFORD ROAD
City-St-Zip: ORLANDO, FL 32803

Title: DPAS () Delete
Name: WERNER, THOMAS,
Address: 111 NORTH ORLANDO AVE
City-St-Zip: WINTER PARK, FL 327893675

Title: AS () Delete
Name: BLOCK, L MARK,
Address: 111 N. ORLANDO AVE
City-St-Zip: WINTER PARK, FL 327893675

Title: DAS () Delete
Name: TREVINO, MAX
Address: 777 SOUTH BURLESON BLVD.
City-St-Zip: BURLESON, TX 76028

Title: AS () Delete
Name: SKILTON, GARY C
Address: 111 N ORLANDO AVE
City-St-Zip: WINTER PARK, FL 327893675

Title: DV () Delete
Name: CUMMINGS, DES D JR
Address: 2400 BEDFORD ROAD
City-St-Zip: ORLANDO, FL 32803

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
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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 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 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: L. MARK BLOCK

AS

03/23/2004

Electronic Signature of Signing Officer or Director

Date