2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2006
Secretary of State

DOCUMENT# 765157

Entity Name: SUNSYSTEM DEVELOPMENT CORPORATION

Current Principal Place of Business:

111 N. ORLANDO AVE.
WINTER PARK, FL 327893675

New Principal Place of Business:

Current Mailing Address:

111 N. ORLANDO 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
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 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: GARY SKILTON AS 03/02/2006

Electronic Signature of Signing Officer or Director — Date