

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 814290

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** SUNSHINE STATE CARNATIONS INC

**Current Principal Place of Business:**

P. O. BOX 573  
S.E. GOMEZ AVE.  
HOBE SOUND, FL 33475

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 573  
S.E. GOMEZ AVE.  
HOBE SOUND, FL 33475

**New Mailing Address:**

**FEI Number:** 59-0852174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRARY, EVANS, JR.  
555 COLORADO AVE., STE 1  
STUART, FL 34994 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:** COB  
**Name:** NISSEN, OLE  
**Address:** 855 TURTLE BEACH ROAD  
**City-St-Zip:** NORTH PALM BEACH, FL 33408

**Title:** S  
**Name:** NISSEN, KAREN  
**Address:** 200 HAMPTON PL  
**City-St-Zip:** JUPITER, FL 33458

**Title:** P  
**Name:** NISSEN, PETER  
**Address:** 11863 LAKE SHORE PL  
**City-St-Zip:** NORTH PALM BEACH, FL 33408

**Title:** VPT  
**Name:** NISSEN, ERIC  
**Address:** 18890 GUMBO LIMBO CT  
**City-St-Zip:** JUPITER, FL 33458

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ERIC NISSEN

VPT

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date