2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F03000002417

Name:

Address:

City-St-Zip:

FILED Apr 13, 2009 Secretary of State

Entity Na	me: SUN PUE	BLICATIONS OF FLORIDA, IN	IC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	ERTYS WAY D, FL 33810					
Current Mailing Address:			New Maili	New Mailing Address:		
	ERTYS WAY D, FL 33805					
FEI Number	: 02-0681624	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
1201 HAY	ATION SERVIC S STREET SSEE, FL 3230	CES COMPANY D1 US				
The above in the State	e named entity s e of Florida.	submits this statement for the	purpose of changing	ts register	red office or registered agent, or both,	
SIGNATU	RE:					
	Electror	ic Signature of Registered Ag	ent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CPD () BICKFORD, AN 945 HAVERFOI BRYN MAWR, I	RD ROAD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () CATHERWOOD 945 HAVERFOI BRYN MAWR,	RD ROAD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () MCLEAN, WILL 945 HAVERFOI BRYN MAWR, I	RD ROAD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	()	Delete	Title:	VP	() Change (X) Addition	

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

Name:

Address:

City-St-Zip:

WILKINSON, DENNIS

7060 HAVERTYS WAY

LAKELAND, FL 33805

SIGNATURE: ANDREW T. BICKFORD Ρ 04/13/2009