

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19995

FILED
Feb 07, 2012
Secretary of State

Entity Name: SUNSHINE INSURANCE, INC.

Current Principal Place of Business:

318 SHORE DRIVE E
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

13911 W HILLSBOROUGH AVE
SUITE 318
TAMPA, FL 33635

New Mailing Address:

FEI Number: 59-2087275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHILTZ, SCOTT E ESQUIRE
1968 BAYSHORE BLVD
DUNEDIN, FL 34698 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: PTSD
Name: SCHILTZ, TROY A
Address: 318 SHORE DRIVE E
City-St-Zip: OLDSMAR, FL 34677

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: TROY A SCHILTZ

PRES

02/07/2012

Electronic Signature of Signing Officer or Director

Date