

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F47596

FILED  
Feb 22, 2010  
Secretary of State

**Entity Name:** SUNSHINE GROUP LEASING, INC.

**Current Principal Place of Business:**

C/O GARY NASH  
2101 MORRISON AVE  
TAMPA, FL 336062433 US

**New Principal Place of Business:**

2101 W MORRISON AVE  
TAMPA, FL 336062433 US

**Current Mailing Address:**

C/O GARY NASH  
2101 MORRISON AVE  
TAMPA, FL 336062433 US

**New Mailing Address:**

2101 W MORRISON AVE  
TAMPA, FL 336062433 US

**FEI Number:** 59-2233498

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NASH, GARY  
2101 MORRISON AVE  
TAMPA, FL 33606 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: VD  
Name: NASH, MICHAEL A  
Address: 2101 MORRISON AVE  
City-St-Zip: TAMPA, FL 33606 US

Title: STD  
Name: NASH, GARY  
Address: 2101 MORRISON AVE  
City-St-Zip: TAMPA, FL 33606 US

Title: PD  
Name: NASH, ARTHUR R  
Address: 2101 MORRISON AVE  
City-St-Zip: TAMPA, FL 33606 US

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:** GARY NASH

STD

02/22/2010

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

\_\_\_\_\_  
Date