


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED  
Mar 16, 2006 08:00 AM  
Secretary of State**

DOCUMENT # G20148  
1. Entity Name  
SUN HILL OPTICAL CORPORATION



Principal Place of Business: 1647 SUNCITY CENTER PLAZA, CENTER PLAZA BLDG., SUITE 203-B, SUN CITY CENTER, FL 33573 US  
Mailing Address: 1647 SUNCITY CENTER PLAZA, CENTER PLAZA BLDG., SUITE 203-B, SUN CITY CENTER, FL 33573 US



02082006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number: 59-2334951 Applied For: Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
FINNEGAN, MARY RITA  
322 HOLLOW TREE DRIE  
SEFFNER, FL 33584

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Mary R Finnegan Pres.* DATE: 3-10-06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

000000470395  
03/28/06-80012-009 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	FINNEGAN, MARY RITA
STREET ADDRESS	322 HOLLOWTREE DR.
CITY-ST-ZIP	SEFFNER, FL
TITLE	VP
NAME	FINNEGAN, MICHAEL FRANCIS
STREET ADDRESS	739 ISLETON DR
CITY-ST-ZIP	BRANDON, FL
TITLE	VP
NAME	FINNEGAN, FRANK ANTHONY
STREET ADDRESS	322 HOLLOWTREE DR.
CITY-ST-ZIP	SEFFNER, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary R Finnegan* MARY FINNEGAN, Pres. DATE: 3/10/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR