2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G95137

1. Entity Name
SUNSET SOUND COMPANY, INC.

Principal Place of Business	Mailing Address
5571 HUNTER BLVD. STE E NAPLES, FL 34416 US	P.O. BOX 1846 MARCO ISLAND, FL 34146

DO NOT WRITE IN THIS SPACE

02012008   No Chg-P   CR2E034 (11/05)

4. FEI Number 59-2389833	Applied For
	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HELFGOTT, MARK
5571 HUNTER BLVD
NAPLES, FL 34116

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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

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE
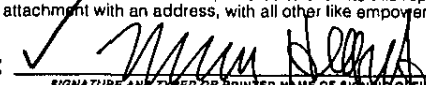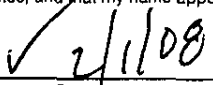
FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10.	OFFICERS AND DIRECTORS
TITLE	PTD
NAME	HELFGOTT, MARK
STREET ADDRESS	P.O. BOX 1846
CITY-ST-ZIP	MARCO ISLAND, FL 34146
TITLE	VSD
NAME	SCHNEIDER, GREGORY R.
STREET ADDRESS	1848 NORTH BAHAMA
CITY-ST-ZIP	MARCO ISLAND, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/15/08-80032-030 150.00

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 119, 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: _____ MARK HELFGOTT   1/1/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #