

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H63751

Entity Name: SULLENBERGER, INC.

FILED
Feb 28, 2008
Secretary of State

Current Principal Place of Business:

8919 MAISLIN DRIVE
TAMPA, FL 33637 US

New Principal Place of Business:

8949 MAISLIN DRIVE
TAMPA, FL 33637 US

Current Mailing Address:

8919 MAISLIN DR
TAMPA, FL 33637 US

New Mailing Address:

8949 MAISLIN DR
TAMPA, FL 33637 US

FEI Number: 59-2546265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLENBERGER, ROBERT E.
8919 MAISLIN DRIVE
TAMPA, FL 33637 US

Name and Address of New Registered Agent:

SULLENBERGER, ROBERT E.
8949 MAISLIN DRIVE
TAMPA, FL 33637 US

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:

02/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SULLENBERGER, ROBERT, E.
Address: 8919 MAISLIN DRIVE
City-St-Zip: TAMPA, FL 33637

Title: STD () Delete
Name: SULLENBERGER, DONNA, R.
Address: 8919 MAISLIN DRIVE
City-St-Zip: TAMPA, FL 33637

Title: O () Delete
Name: SULLENBERGER, BRETT E
Address: 8919 MAISLIN DR.
City-St-Zip: TAMPA, FL 33637

Title: O () Delete
Name: CASEY, CARLA A
Address: 8919 MAISLIN DR.
City-St-Zip: TAMPA, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SULLENBERGER, ROBERT, E.
Address: 8949 MAISLIN DRIVE
City-St-Zip: TAMPA, FL 33637

Title: STD (X) Change () Addition
Name: SULLENBERGER, DONNA, R.
Address: 8949 MAISLIN DRIVE
City-St-Zip: TAMPA, FL 33637

Title: O (X) Change () Addition
Name: SULLENBERGER, BRETT E
Address: 8949 MAISLIN DR.
City-St-Zip: TAMPA, FL 33637

Title: O (X) Change () Addition
Name: CASEY, CARLA A
Address: 8949 MAISLIN DR.
City-St-Zip: TAMPA, FL 33637

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.

SIGNATURE: ROBERT SULLENBERGER

PD

02/28/2008

Electronic Signature of Signing Officer or Director

Date