

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H64658

FILED  
Jan 15, 2008  
Secretary of State

Entity Name: SUNSHINE LAND DESIGN, INC.

**Current Principal Place of Business:**

3291 SE LIONEL TERRACE  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 559  
PT. SALERNO, FL 34992

**New Mailing Address:**

FEI Number: 59-2712892      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

TAYLOR, FRANKIE  
5228 SW ANHINGA AVE  
PALM CITY, FL 34990      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: VSD ( ) Delete  
Name: TAYLOR, FRANKIE  
Address: 5228 SW ANHINGA AVE  
City-St-Zip: PALM CITY, FL 34990

Title: PTD ( ) Delete  
Name: TAYLOR, TIMOTHY R  
Address: 5228 SW ANHINGA AVE  
City-St-Zip: PALM CITY, FL 34990

Title: VD ( ) Delete  
Name: TAYLOR, MARGARET  
Address: 5411 SE CELESTIAL CIRCLE  
City-St-Zip: STUART, FL 34997

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: TAYLOR, MARGARET  
Address: 5441 SE MEADOW SPRINGS BLVD  
City-St-Zip: STUART, FL 34997

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: FRANKIE TAYLOR

VSD

01/15/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date