2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H93850

Title:

Name:

Address:

City-St-Zip:

() Delete

5060 BLUE MAJOR DRIVE

WINDERMERE, FL 34786

CARR, KEITH J

FILED Apr 24, 2009 Secretary of State

| Entity Nam | ne: SUNSCA | PE HOMES, INC. | | | |
|---|---|--------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| 8919 CONF ORLANDO | | RMERE ROAD US | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| PO BOX 92 WINDERMI | 8 ERE, FL 3478 | 36 US | | | |
| FEI Number: | 59-2621107 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address o | Name and Address of New Registered Agent: | |
| CARR, RIC 6749 VALH WINDERMI | | 36 US | | | |
| The above in the State | named entity s of Florida. | submits this statement for th | e purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUR | E: | | | | |
| Electronic Signature of Registered Agent | | | Agent | Date | |
| Election Cam | paign Financing | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PST () CARR, RICHAR 6749 VALHALLA WINDERMERE | A WAY | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () CARR, KAREN 6749 VALHALL WINDERMERE | A WAY | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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.

Title:

Name:

Address:

City-St-Zip:

DVP

CARR, KEITH J

103 ZACHARY WADE ST

WINTER GARDEN, FL 34787

(X) Change () Addition

SIGNATURE: RICHARD L CARR Ρ 04/24/2009