

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H99148

FILED
Jul 13, 2004
Secretary of State

Entity Name: SUNBELT SYSTEMS CONCEPTS, INC.

Current Principal Place of Business:

111 NORTH ORLANDO AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

111 NORTH ORLANDO AVE
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-2645801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TRIMBLE, T L
111 NORTH ORLANDO AVENUE
WINTER PARK, FL 32789 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: DCP () Delete
Name: SHAW, TERRY D
Address: 111 NORTH ORLANDO AVENUE
City-St-Zip: WINTER PARK, FL

Title: VD () Delete
Name: JERNIGAN, DONALD J
Address: 601 E ROLLINS ST
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: WERNER, THOMAS L
Address: 111 N ORLANDO AVE
City-St-Zip: WINTER PARK, FL 32789

Title: AS () Delete
Name: DE PRADA, ARIEL
Address: 111 NORTH ORLANDO AVENUE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ARIEL DE PRADA

AS

07/13/2004

Electronic Signature of Signing Officer or Director

Date