

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J10116

Entity Name: SUNSTREAM, INC.

FILED
Jun 12, 2009
Secretary of State

Current Principal Place of Business:

6231 ESTERO BLVD, 3RD FLOOR
FT MYERS BCH., FL 33931

New Principal Place of Business:

6231 ESTERO BOULEVARD
3RD FLOOR
FORT MYERS BEACH, FL 33931

Current Mailing Address:

6231 ESTERO BLVD, 3RD FLOOR
FT MYERS BCH., FL 33931

New Mailing Address:

6231 ESTERO BOULEVARD
3RD FLOOR
FORT MYERS BEACH, FL 33931

FEI Number: 58-1674018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONSRUD, MARY ANNE
6620 ESTERO BLVD
FT. MYERS BEACH, FL 33931 US

Name and Address of New Registered Agent:

BAKER, MARY ANNE
6231 ESTERO BOULEVARD
FORT MYERS BEACH, FL 33931 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: MARY ANNE BAKER

06/12/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LAWRENCE, PAUL W
Address: 1125 S FRONTAGE RD SUITE 4
City-St-Zip: HASTINGS, MN 55033

Title: VSD () Delete
Name: VOGEL, JAMES D.
Address: 3936 TAMiami TRAIL N. STE. D
City-St-Zip: NAPLES, FL 33940

Title: DV () Delete
Name: SWANSON, ROBERT J
Address: 1125 S FRONTAGE RD SUITE 4
City-St-Zip: HASTINGS, MN 55033

Title: D () Delete
Name: VOGEL, RICHARD M
Address: 3936 TAMiami TRAIL N. STE. D
City-St-Zip: NAPLES, FL 33940

Title: DPT () Delete
Name: LAWRENCE, DAVID A.
Address: 1125 S FRONTAGE RD SUITE 4
City-St-Zip: HASTINGS, MN 55033

Title: SVD () Delete
Name: FLUEGEL, DONALD
Address: 1303 S FRONTAGE RD #5
City-St-Zip: HASTINGS, MN 55033

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:

Title: DPT (X) Change () Addition
Name: LAWRENCE, DAVID A.
Address: 6231 ESTERO BOULEVARD
City-St-Zip: FORT MYERS BEACH, FL 33931

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

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: DAVID A. LAWRENCE

DPT

06/12/2009

Electronic Signature of Signing Officer or Director

Date