

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J10306

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: SUN SPORTS CYCLE AND WATERCRAFT, INC.

## Current Principal Place of Business:

3441 COLONIAL BLVD, #1  
FT. MYERS, FL 33966

## New Principal Place of Business:

## Current Mailing Address:

3441 COLONIAL BLVD.  
#1  
FT. MYERS, FL 33966 US

## New Mailing Address:

FEI Number: 59-2674098      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSTONE, IAIN  
3441 COLONIAL BLVD #1  
FT. MYERS, FL 33966 US

## Name and Address of New Registered Agent:

JOHNSTONE, IAIN A  
3441 COLONIAL BLVD #1  
FT. MYERS, FL 33966 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: IAIN JOHNSTONE

04/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: JOHNSTONE, IAIN  
Address: 3441 COLONIAL BLVD #1  
City-St-Zip: FT. MYERS, FL 33966 US

Title: VP ( ) Delete  
Name: JOHNSTONE, IAIN  
Address: 3441 COLONIAL BLVD #1  
City-St-Zip: FORT MYERS, FL 33966 US

Title: SEC ( ) Delete  
Name: JOHNSTONE, IAIN  
Address: 3441 COLONIAL BLVD #1  
City-St-Zip: FORT MYERS, FL 33966 US

Title: TR ( ) Delete  
Name: JOHNSTONE, IAIN  
Address: 3441 COLONIAL BLVD #1  
City-St-Zip: FORT MYERS, FL 33966 US

## 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 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: IAIN JOHNSTONE

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date