

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J34715

FILED
Apr 30, 2009
Secretary of State

Entity Name: SUNDANCE GROWERS, INC.

Current Principal Place of Business:

4910 U.S. HIGHWAY 415
SUN CITY, FL 33586

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7357
SUN CITY, FL 33586

New Mailing Address:

FEI Number: 58-1713726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRA, MARTIN
4910 U.S. HIGHWAY 415
SUN CITY, FL 33586 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: PD () Delete
Name: WEISS, RUSSELL
Address: 40 INLET VIEW
City-St-Zip: EAST MORICHES, NY 11940

Title: VPD () Delete
Name: WEISS, KIRK
Address: PO BOX 472
City-St-Zip: CENTER MORICHES, NY 11934

Title: TD () Delete
Name: WEISS, WAYNE
Address: PO BOX 9
City-St-Zip: EAST MORICHES, NY 11940

Title: S () Delete
Name: MARRA, MARTIN
Address: 4910 US 41 S
City-St-Zip: SUN CITY, FL

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: RUSSELL WEISS

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date