

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J53383

FILED
Apr 26, 2007
Secretary of State

Entity Name: SUN SURFACES OF JACKSONVILLE, INC.

Current Principal Place of Business:

967 11TH AVENUE S
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

985 11TH AVENUE, SOUTH
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-2829050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALCANOFF, GREGORY G.
985- 11TH AVE S
JACKSONVILLE BCH, FL 322501249 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: BALCANOFF, GREGORY G, .
Address: 985- 11TH AVE S
City-St-Zip: JACKSONVILLE BCH, FL

Title: S () Delete
Name: BALCANOFF, BARBARA A, .
Address: 985-11TH AVE S.
City-St-Zip: JACKSONVILLE BCH, FL

Title: V () Delete
Name: BALCANOFF, MARK G
Address: 985 11TH AVE SO
City-St-Zip: JACKSONVILLE BCH, FL

Title: C () Delete
Name: BALCANOFF, RODD G
Address: 985 11TH AVE SO
City-St-Zip: JACKSONVILLE BCH, 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 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: GREG BALCANOFF

PRES

04/26/2007

Electronic Signature of Signing Officer or Director

_____ Date