

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L42527

FILED
Apr 14, 2008
Secretary of State

Entity Name: SUNLINE ENGINEERING CONTRACTORS, INC.

Current Principal Place of Business:

2180 SW POMA DRIVE
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

2180 SW POMA DRIVE
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: 65-0172569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRADLEY, DAVID
5321 NW 58TH TERR
CORAL SPRINGS, FL 33067 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 (X).

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRADLEY, DAVID A MR
Address: 5321 NW 58TH TERR
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: VPD () Delete
Name: STRINGER, RANDY W MR.
Address: 410 NW DORSET CT
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: TD () Delete
Name: COPE, KEVIN D MR
Address: 2738 SW ABELARD ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: SD () Delete
Name: KNIGHT, PAUL
Address: 2120 SW POMA DRIVE, UNIT 8
City-St-Zip: PALM CITY, FL 34990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BRADLEY, DAVID A MR
Address: 5321 NW 58TH TERR
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: VPRE (X) Change () Addition
Name: STRINGER, RANDY W MR.
Address: 410 NW DORSET CT
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: TREA (X) Change () Addition
Name: COPE, KEVIN D MR
Address: 2738 SW ABELARD ST
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: SEC (X) Change () Addition
Name: KNIGHT, PAUL T MR
Address: 6522 AMBERWOODS DRIVE
City-St-Zip: BOCA RATON, FL 33433 US

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: KEVIN D COPE

Electronic Signature of Signing Officer or Director

TREA

04/14/2008

_____ Date