# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 25, 2007**
**Secretary of State**

DOCUMENT# L69826

**Entity Name:** SUNDIVER PRODUCTIONS COMPANY, INC.

**Current Principal Place of Business:**

1611 WEST WIND DRIVE
PO BOX 1203
RHINELANDER, WI 545011203 US

**New Principal Place of Business:**

1611 WEST WIND DRIVE
RHINELANDER, WI 54501 US

**Current Mailing Address:**

P.O. BOX 1203
RHINELANDER, WI 545011203 US

**New Mailing Address:**

1611 WEST WIND DRIVE
RHINELANDER, WI 54501 US

**FEI Number: 65-0193045** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHORE, BARBARA
13 DAHOON CIRCLE, N.
HOMOSASSA, FL 34446 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: COREY, DONNA S
Address: 1611 WEST WIND DRIVE
City-St-Zip: RHINELANDER, WI 545011203 US

Title: VPD ( ) Delete
Name: COREY-LUSE, CRISTI M.
Address: 7226 MILDRED PARKWAY
City-St-Zip: RHINELANDER, WI 54501

Title: SD ( ) Delete
Name: COREY, JENNIE R
Address: 7226 MILDRED PARKWAY
City-St-Zip: RHINELANDER, WI 54501

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition
Name: COREY, DONNA S
Address: 1611 WEST WIND DRIVE
City-St-Zip: RHINELANDER, WI 54501 US

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: DONNA S. COREY PD 04/25/2007

Electronic Signature of Signing Officer or Director — Date