2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2009
Secretary of State

DOCUMENT# N02000009457

Entity Name: SONRISE RANCH, INC.

Current Principal Place of Business:

1901 HWY A1A STE 4
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

225 FIFTH AVENUE
SUITE 4
INDIALANTIC, FL 32903

Current Mailing Address:

1901 HWY A1A STE 4
INDIAN HARBOUR BEACH, FL 32937

New Mailing Address:

225 FIFTH AVENUE
SUITE 4
INDIALANTIC, FL 32903

FEI Number: 56-2327080 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARK, H.L. III
3700 N RIVERSIDE DRIVE
INDIALANTIC, FL 32903 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CLARK, H.L. III
Address: 3700 N RIVERSIDE DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: D ( ) Delete
Name: CLARK, CAROL H
Address: 3700 N RIVERSIDE DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: D ( ) Delete
Name: CALDWELL, HARTLEY
Address: 3946 TURKEY POINT DR
City-St-Zip: MELBOURNE, FL 32934

Title: D ( ) Delete
Name: BONSTEEL, FREDRICK C
Address: 3721 BIGELOW DRIVE
City-St-Zip: HOLIDAY, FL 34691

Title: D ( ) Delete
Name: JONES, RICHARD O
Address: 1250 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, 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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: H. L. CLARK, III DIR 01/29/2009

Electronic Signature of Signing Officer or Director — Date