2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012611

Name:

Address:

City-St-Zip:

JACOX, ANITA L

6838 DOVE CROSS LOOP

LAKELAND, FL 33810

FILED Apr 30, 2007 Secretary of State

Entity Name: SUNSHINE KIDS, INC. **Current Principal Place of Business: New Principal Place of Business:** 2310 EDGEWOOD DR. S. LAKELAND, FL 33803 **Current Mailing Address: New Mailing Address:** P.O. BOX 91567 LAKELAND, FL 33804 FEI Number: 20-8018229 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JACOX, ANITA L 6838 DOVE CROSS LOOP LAKELAND, FL 33810 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Change () Addition () Delete DOREY, BRUCE Name: Name: Address: 920 WHISPER LAKE DR Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: Title: Title: () Delete () Change () Addition Name: WATSON, TIA R Name: Address: 824 HOLLINGSWORTH RD Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: Title: (X) Delete Title: () Change () Addition SCHEIDIG, GERTRUDE Name: Name: 2025 SYLVESTER RD #RR2 Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: SEC () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ANITA L JACOX SEC 04/30/2007