

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19004

FILED  
Apr 14, 2010  
Secretary of State

Entity Name: SUN COUNTRY TRAIL BLAZERS INC.

## Current Principal Place of Business:

C/O JOYCE TYSON  
12320 NE 135TH ST.  
FT. MCCOY, FL 32134 US

## Current Mailing Address:

C/O JOYCE TYSON  
12320 NE 135TH ST.  
FT. MCCOY, FL 32134 US

## New Principal Place of Business:

C/O DARLENE COLUCCI  
10351 SW 69TH COURT  
OCALA, FL 34476 US

## New Mailing Address:

C/O DARLENE COLUCCI  
10351 SW 69TH COURT  
OCALA, FL 34476 US

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

## Name and Address of Current Registered Agent:

TYSON, JOYCE  
12320 NE 135TH ST.  
FT. MCCOY, FL 32134 US

## Name and Address of New Registered Agent:

COLUCCI, DARLENE M  
10351 SW 69TH COURT  
OCALA, FL 34476 US

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: DARLENE COLUCCI

04/14/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: DIAZ, IRIS M  
Address: 9777 NW 83RD PLACE  
City-St-Zip: OCALA, FL 34482 US

Title: V  
Name: MALESKE, NANCY  
Address: 13319 NW 82ND ST. RD.  
City-St-Zip: OCALA, FL 34482 US

Title: S  
Name: COLUCCI, DARLENE  
Address: 10351 SW 69TH COURT  
City-St-Zip: OCALA, FL 34476 US

Title: T  
Name: BERNSTEIN, SANDY  
Address: 4750 SW 51ST TERRACE  
City-St-Zip: OCALA, FL 34474 US

Title: PR  
Name: OLSON, JULIE  
Address: 8251 NW 80TH AVE.  
City-St-Zip: OCALA, FL 34482 US

Title: V  
Name: CROSS, JANIS  
Address: PO BOX 1123  
City-St-Zip: DUNNELLON, FL 34430 US

I hereby 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 all other like empowered.

SIGNATURE: DARLENE COLUCCI

S

04/14/2010

Electronic Signature of Signing Officer or Director

Date