

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N29077

1. Entity Name

SUNSHINE EXPRESS HARMONY, INC.

Principal Place of Business

1609 HONTOON RD  
DELAND FL 32720  
US

Mailing Address

1609 HONTOON RD  
DELAND FL 32720  
US

2. Principal Place of Business

2508 Arslan Street

Suite, Apt. #, etc.

3. Mailing Address

2508 Arslan Street

Suite, Apt. #, etc.

City & State

Deltona, FL

Zip

32738

Country

USA

City & State

Deltona, FL

Zip

32738

Country

USA

6. Name and Address of Current Registered Agent

VIOLA, DOROTHY  
2628 MORGAN RD  
DELAND FL 32720

DO NOT WRITE IN THIS SPACE  
05/23/00 90214 004 - 61-25

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name DOROTHY DEBRETSKY

Street Address (P.O. Box Number is Not Acceptable)

1131 Providence Blvd.

City DELTONA

FL

Zip Code

32725

8. 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

*Dorothy Debretsky* DOROTHY DEBRETSKY, President

7/12/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	VIOLA, DOROTHY	
STREET ADDRESS	2628 MORGAN RD	
CITY-ST-ZIP	DELAND FL	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	WILSON, LOUISE	
STREET ADDRESS	118 ALANO RD	
CITY-ST-ZIP	DEBARY FL	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	LITTLE, MARCY	
STREET ADDRESS	1379 SACRAMENTO ST	
CITY-ST-ZIP	DELTONA FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	LINDSAY, DARLENE	
STREET ADDRESS	1609 HONTOON RD	
CITY-ST-ZIP	DELAND FL 32720	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEBRETSKY, DOROTHY	
STREET ADDRESS	1131 PROVIDENCE BLVD.	
CITY-ST-ZIP	DELTONA, FL 32725	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAUCH, KATHY	
STREET ADDRESS	405 Greenridge CT.	
CITY-ST-ZIP	DeBary, FL 32713	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WATERSON, JOAN	
STREET ADDRESS	2508 ARSLAN STREET	
CITY-ST-ZIP	DELTONA, FL 32738	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RUSSELL, PHYLLIS	
STREET ADDRESS	1432 NORTHVALE STREET	
CITY-ST-ZIP	DELTONA, FL 32725	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Dorothy Debretsky* DOROTHY DEBRETSKY, President

7/12/00

Date

Daytime Phone #

APPROVED AND FILED

00 JUL 18 PM 2:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CR2E037 (5/00)

Fig. 2el 2

<b>SUNSHINE EXPRESS</b> 05/92 1609 HONTOWN RD. DELAND, FL 32720		102435 742	
		April 27, 2000 Date 63-943/631 BRANCH 97402	
Pay to the order of <u>Department of State</u>		\$ 61.25	
<u>Sixty-One &amp; 25/100</u>		Dollars	
<b>SouthTrust Bank</b> Deland, FL			
For <u>Form #N29077 (4BR)</u>		<u>Phyllis H. Dinnell</u>	
⑆063109430⑆ 01 107 887⑈ 0742		⑈00000006125⑈	

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INCLEARINGS WORK  
CLEARINGHOUSE WORK  
140030552 0408 05000 00 060100

BANK OF AMERICA NA JA  
⑈0630000474 E6131 96  
05/31/00  
074090100

2009 MAY 16 2000 7  
DEPARTMENT OF STATE  
ACCT. #: 1009068706

FOR DEPOSIT ONLY

7/13/00

Dear Michelle Milligan -

Per our phone conversation July 12<sup>th</sup>, we paid the fee of \$61.25 - see the copy here of front + back of our cancelled check. Also, enclosed is the fee of \$8.75 our check #753 dated 7/12/00. This is for a certificate of status.

Thank You for your friendly assistance. Sincerely,  
Debbie