2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000623

Entity Name: SUNSHINE AIREDALERS OF SOUTH FLORIDA, INC.

FILED Feb 25, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
706 LAKE SEBRING,	JOSEPHINE [FL 33875	DRIVE			
Current Mailing Address:			New Maili	New Mailing Address:	
706 LAKE SEBRING,	JOSEPHINE [FL 33875	DRIVE			
FEI Number:	65-0536398	FEI Number Applied For()	FEI Number Not App	Olicable () Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and	d Address of New Registered Agent:	
2740 E. OA SUITE 206		(BOULEVARD			
	named entity of Florida.	submits this statement for the p	urpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Age	nt	Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	S (WEINSTEIN, P 11041 SEAPOI BOCA RATON,	RT LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BANKESTER, F 23087 SAILFIS		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition BANKESTER, PEGGY 23087 SAILFISH LANE SUMMERLAND KEY, FL 33042	
Title: Name: Address: City-St-Zip:	TRUMBLE, CIN 2016 TANGLE\	Delete DY VOOD WAY NE BURG, FL 33702	Title: Name: Address: City-St-Zip:	P (X) Change () Addition TRUMBLE, CINDY 2016 TANGLEWOOD WAY NE SAINT PETERSBURG, FL 33702	
Title: Name: Address: City-St-Zip:	P (SCHLOSSMAN 1464 WINDSO ORLANDO, FL	NG ROAD	Title: Name: Address: City-St-Zip:	T (X) Change () Addition FINNEY, SUSAN 706 LAKE JOSEPHINE DRIVE SEBRING, FL 33875	
Title: Name: Address: City-St-Zip:	GUNTER, KAR 710 OAKLAND		Title: Name: Address: City-St-Zip:	D (X) Change () Addition SCHLOSSMANN, SARA 1464 WINDSONG ROAD ORLANDO, FL 32809	
Title: Name: Address: City-St-Zip:	FINNEY, SUSA	EPHINE DRIVE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition GUNTER, KAREN 710 OAKLAND RD ALTAMONTE SPRINGS, FL 32701	

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: SUSAN FINNEY TREA 02/25/2009