

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002424

FILED  
Jan 05, 2005  
Secretary of State

Entity Name: SUNSHINE JUBILEE - SPEBSQSA;PO31, INC.

## Current Principal Place of Business:

2550 HIGHLANDS VUE PKWY  
C/O KEITH HOPKINS  
LAKELAND, FL 33813 US

## New Principal Place of Business:

## Current Mailing Address:

2550 HIGHLANDS VUE PKWY  
C/O KEITH HOPKINS  
LAKELAND, FL 33813 US

## New Mailing Address:

FEI Number: 59-3177728

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOPKINS, KEITH  
2550 HIGHLANDS VUE PKWY  
LAKELAND, FL 33813 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: P ( ) Delete  
Name: LAMY, JOE SR.  
Address: 416 S. BANANA RIVER BLVD.  
City-St-Zip: COCOA BEACH, FL 32931

Title: T ( ) Delete  
Name: RAMSEY, TONY  
Address: 8906 EXPOSITION DR  
City-St-Zip: TAMPA, FL 33626

Title: D ( ) Delete  
Name: NANTZ, HAROLD  
Address: 1421 HENDREN DR  
City-St-Zip: MELBOURNE, FL 32935

Title: D ( ) Delete  
Name: WEBB, MARSHALL  
Address: 5514 STULL AVE  
City-St-Zip: ORLANDO, FL 32810

Title: S ( ) Delete  
Name: HOPKINS, KEITH  
Address: 2550 HIGHLANDS VUE PKWY  
City-St-Zip: LAKELAND, FL 33813

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: STUMP, BOB  
Address: 1273 GLADSTONE DR  
City-St-Zip: DELTONA, FL 32725

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 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 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: KEITH W HOPKINS

SCTY

01/05/2005

Electronic Signature of Signing Officer or Director

Date