

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003476

FILED
Jan 16, 2009
Secretary of State

Entity Name: SONSHINE NORTH VIA DE CRISTO, INC.

Current Principal Place of Business:

SONSHINE NORTH VIA DE CRISTO
2156 LOCH RANE BLVD.
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

C/O THOMAS F. CULVERWELL
3742 MANOR OAKS DRIVE
JACKSONVILLE, FL 322779710 US

New Mailing Address:

FEI Number: 59-3461094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CULVERWELL, THOMAS F TREAS
3742 MANOR OAKS DRIVE
JACKSONVILLE, FL 322779710 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: D () Delete
Name: LENSCH, VIRGINIA PRES
Address: 223 HERMITAGE WAY
City-St-Zip: ST. SIMONS ISLAND, GA 31522 US

Title: D () Delete
Name: HAMMER, TAMRE VP
Address: 1301 BLACK GUM CT
City-St-Zip: ORANGE PARK, FL 32073 US

Title: S () Delete
Name: MCCRORK, LYNNE SEC
Address: 677 RIDGESTONE COURT
City-St-Zip: ORANGE PARK, FL 32065 US

Title: D () Delete
Name: TOUW, TOMMY
Address: 1904 GENTLEBREEZE RD
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: D () Delete
Name: LABRANCHE, DARRYL
Address: 3551 CITATION DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: D () Delete
Name: LUNETTA, BETTILYN
Address: 716 CHERRY GROVE RD
City-St-Zip: ORANGE PARK, GA 32073 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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Title: () Change () Addition
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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 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: THOMAS F. CULVERWELL

TRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date