

**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # N97000005406**

1. Entity Name  
**SONSHINE INTERNATIONAL PUBLICATION, INC.**



Principal Place of Business  
**427 TIMBER LAKE DR  
MELBOURNE, FL 32941 US**

Mailing Address  
**427 TIMBER LAKE DR  
MELBOURNE, FL 32941 US**



04282004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3477165**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**BRADLEY, FRANCIS M  
427 TIMBERLAKE DRIVE  
MELBOURNE, FL 32940**

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	DT
NAME	BRADLEY, FRANCIS
STREET ADDRESS	427 TIMBERLAKE
CITY-ST-ZIP	MELBOURNE, FL
TITLE	DS
NAME	BRADLEY, NANCY
STREET ADDRESS	4277 TIMBERLAKE
CITY-ST-ZIP	MELBOURNE, FL 32940
TITLE	D
NAME	BRADLEY, ANDREW
STREET ADDRESS	401 W. COMMERCE
CITY-ST-ZIP	MILFORD, MI 48384
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000153172  
05/04/04-80118-001 61.25

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Francis M. Bradley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/21/2004*  
Date

*321-242-1421*  
Daytime Phone #