

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 28, 2009  
Secretary of State**

DOCUMENT# N99000002313

Entity Name: SUNSHINE SKYLINERS, INC.

**Current Principal Place of Business:**

4601 THORNLEA RD  
ORLANDO, FL 32817

**New Principal Place of Business:**

**Current Mailing Address:**

4601 THORNLEA RD  
ORLANDO, FL 32817

**New Mailing Address:**

FEI Number: 59-3571295      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ELLIOTT, CLAYTON M  
4601 THORNLEA RD  
ORLANDO, FL 32817      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: PD ( ) Delete  
Name: ELLIOTT, CLAYTON  
Address: 4601 THORNLEA RD  
City-St-Zip: ORLANDO, FL 32817

Title: TD ( ) Delete  
Name: ELLIOTT, BILLIE J  
Address: 4601 THORNLEA RD  
City-St-Zip: ORLANDO, FL 32817

Title: D ( ) Delete  
Name: MACEACHRON, SCOTT  
Address: 2511 NE 20TH AVE  
City-St-Zip: LIGNTHOUSE PT, FL 33064

**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  
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: CLAYTON ELLIOTT

PD

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date