

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000045891

Entity Name: SUN RIDGE, INC.

FILED  
Jan 13, 2009  
Secretary of State

## Current Principal Place of Business:

1130 S LAKESHORE BLVD  
LAKE WALES, FL 33853 US

## New Principal Place of Business:

890 WALK IN WATER RD  
LAKE WALES, FL 33898 US

## Current Mailing Address:

PO BOX 204  
LAKE WALES, FL 338590204 US

## New Mailing Address:

PO BOX 227  
LAKE WALES, FL 33859 US

FEI Number: 59-3649758

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TURNQUIST, LEE W  
1130 SO. LAKESHORE BLVD.  
LAKE WALES, FL 33853 US

## Name and Address of New Registered Agent:

BENNETT, LAURA L  
890 WALK IN WATER RD  
LAKE WALES, FL 33898 US

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: LAURA BENNETT

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: TURNQUIST, LEE W  
Address: 1130 SO. LAKESHORE BLVD.  
City-St-Zip: LAKE WALES, FL 338534312

Title: STD ( ) Delete  
Name: TURNQUIST, NANCY M  
Address: 1130 S LAKESHORE BLVD  
City-St-Zip: LAKE WALES, FL 338534312

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change ( ) Addition  
Name: BENNETT, LAURA L  
Address: 890 WALK IN WATER RD  
City-St-Zip: LAKE WALES, FL 33898

Title: D (X) Change ( ) Addition  
Name: VOLLENDORF, ANN T  
Address: N6389 COUNTY RD X  
City-St-Zip: TONY, WI 54563

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURA BENNETT

PDST

01/13/2009

Electronic Signature of Signing Officer or Director

Date