

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000006020

Entity Name: SUNRAY NURSERY, INC.

FILED
Aug 25, 2006
Secretary of State

Current Principal Place of Business:

5635 S R 54
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

5151 LEEWARD LN
NEW PORT RICHEY, FL 34652

Current Mailing Address:

5635 S R 54
NEW PORT RICHEY, FL 34652

New Mailing Address:

5151 LEEWARD LN
NEW PORT RICHEY, FL 34652

FEI Number: 59-3696505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINGLETARY, KEVIN
5633 SR 54
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

SINGLETARY, KEVIN
5151 LEEWARD LN
NEW PORT RICHEY, FL 34652 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: KEVIN SINGLETARY

08/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SINGLETARY, KEVIN L
Address: 7936 ROYAL HART DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: DVP () Delete
Name: SINGLETARY, DAVID J
Address: 5730 DALTON COURT
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SINGLETARY, KEVIN L
Address: 5151 LEEWARD LN
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DVP (X) Change () Addition
Name: SINGLETARY, DAVID J
Address: 6000 SEASIDE DR
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the 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: KEVIN SINGLETARY

DP

08/25/2006

Electronic Signature of Signing Officer or Director

Date