

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90250 045 ***150.00

DOCUMENT # P01000011303

1. Entity Name
SUNSHINE ELECTRIC OF PINELLAS, INC.



Principal Place of Business
**499 PATRICIA AVE
SUITE C
DUNEDIN, FL 34698**

Mailing Address
**499 PATRICIA AVE
SUITE C
DUNEDIN, FL 34698**

60002806



2. Principal Place of Business
1100 New York Ave

3. Mailing Address
1100 New York Ave

Suite, Apt. #, etc.
N/A

Suite, Apt. #, etc.
N/A

City & State
Dunedin, FL

City & State
Dunedin, FL

Zip
34698

Country
Pinellas

Zip
34698

Country
Pinellas

01122006 Chg-P CR2E034 (11/05)

4. FEI Number
59-3711576

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**BRADY, KEITH R
499 PATRICIA AVE
SUITE C
DUNEDIN, FL 34698**

Name

Street Address (P.O. Box Number is Not Acceptable)

1100 New York Ave

City
Dunedin

FL

Zip Code
34698

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

Keith R. Brady

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

NOTE: Registered Agent signature required when reinstating.

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D/P
BRADY, KEITH R
499 PATRICIA AVE SUITE C
DUNEDIN, FL 34698** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SEC
STRANDING, JOHN A
8896 94TH STREET NORTH
SEMINOLE, FL 33777** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
**1100 New York Ave
Dunedin, FL 34698**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
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CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-13-06

727-734-8321