

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 8:00 am
Secretary of State

01-20-2004 90046 024 ***158.75

DOCUMENT # P01000038117

1. Entity Name
SUNSHINE FINANCIAL SERVICES INC.



Principal Place of Business
**2116 AUTUMN WAY
MELBOURNE, FL 32935**

Mailing Address
**2116 AUTUMN WAY
MELBOURNE, FL 32935**



2. Principal Place of Business
915 Stone Mountain Ct

3. Mailing Address
915 Stone Mountain Ct

City & State
Melbourne FL

City & State
Melbourne FL

Zip
32934

Country
Fl

01132004 Chg-P CR2E034 (10/03)

4. FEI Number
59-3712395

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**STEELE, KAREN R
2116 AUTUMN WAY
MELBOURNE, FL 32935**

7. Name and Address of New Registered Agent
**Karen R. Steele-Nouseholder
915 Stone Mountain Ct.
Melbourne FL 32934**

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 **Karen R. Steele-Nouseholder President** DATE **1-14-04**

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEELE-HOUSEHOLDER, KAREN R 2116 AUTUMN WAY MELBOURNE, FL 32935	TITLE NAME STREET ADDRESS CITY-ST-ZIP	915 Stone Mountain Ct Melbourne FL 32934
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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 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 **Karen R. Steele-Nouseholder President** DATE **1-14-04** DAYTIME PHONE # **321-752-0528**