

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062719

FILED
May 11, 2004
Secretary of State

Entity Name: SUNSHINE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2605 CLARK ST, STE 101
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

PO BOX 608506
ORLANDO, FL 32860

New Mailing Address:

FEI Number: 59-3738996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DURDEN, TRENTIS
2605 CLARK ST, STE 101
APOPKA, FL 32703

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DURDEN, TRENTIS
Address: 2605 CLARK ST, STE 101
City-St-Zip: APOPKA, FL 32703

Title: D () Delete
Name: BROWDER, RAYMOND
Address: 2605 CLARK ST, STE 101
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: TRENTIS DURDEN

D

05/11/2004

Electronic Signature of Signing Officer or Director

Date