2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000069636

Entity Name: SUNSHINE EVENT MANAGEMENT INC.

Current Principal Place of Business:

223 BELLE AYRE DRIVE
MOUNT DORA, FL 32757

New Principal Place of Business:

4400 N. HWY 19A
SUITE 3
MOUNT DORA, FL 32757

Current Mailing Address:

223 BELLE AYRE DRIVE
MOUNT DORA, FL 32757

New Mailing Address:

4400 N. HWY 19A
SUITE 3
MOUNT DORA, FL 32757

FEI Number: 59-3737789 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWIS, WENDELL A
3763 POMPANO DRIVE S.E.
ST.PETERSBURG, FL 33705

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BROWER, DARA S
Address: 223 BELLE AYRE DRIVE
City-St-Zip: MOUNT DORA, FL 32757

Title: V ( ) Delete
Name: LEWIS, WENDELL A
Address: 3763 POMPANO DRIVE S.E.
City-St-Zip: ST.PETERSBURG, FL 33705 US

Title: V ( ) Delete
Name: BROOKS, JOHN D
Address: 223 BELLE DRIVE
City-St-Zip: MOUNT DORA, FL 32757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DARA SAMANTHA BROWER P 04/29/2002

Electronic Signature of Signing Officer or Director — Date