

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009812

Entity Name: SUNSHINE UTILITIES, INC.

FILED
Apr 14, 2006
Secretary of State

Current Principal Place of Business:

6409 WOODVILLE HWY
TALLAHASSEE, FL 32305

New Principal Place of Business:

1115B ORANGE AVENUE
TALLAHASSEE, FL 32310

Current Mailing Address:

22505 FRANCES WAY
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 50-0000338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, PAMELA J
22505 FRANCES WAY
TALLAHASSEE, FL 32310 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BAILEY, CHARLES T
Address: 22505 FRANCES WAY
City-St-Zip: TALLAHASSEE, FL 32310

Title: P (X) Delete
Name: BAILEY, PAMELA
Address: 22505 FRANCES WAY
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BAILEY, PAMELA J
Address: 22505 FRANCESWAY
City-St-Zip: TALLAHASSEE, FL 32310 US

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 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: PAMELA J BAILEY

PRES

04/14/2006

Electronic Signature of Signing Officer or Director

Date