2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045393

FILED Apr 29, 2006 Secretary of State

Entity Name: SUNSHINE INTEGRITY HOMES, INC. **Current Principal Place of Business: New Principal Place of Business:** 4 NEEDLES DRIVE OCALA, FL 34482 **Current Mailing Address: New Mailing Address:** 4 NEEDLES DRIVE OCALA, FL 34482 FEI Number: 02-0597127 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ORR, STEVE ORR, STEVE Name: Name: 420 SE 39TH AVENUE 4 NEEDLES DR Address: Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: OCALA, FL 34482 Title: () Delete Title: (X) Change () Addition Name: ORR. BRENDA Name: ORR. BRENDA 420 SE 39TH AVENUE Address: 4 NEELDES DR Address: OCALA, FL 34471 OCALA, FL 34482 City-St-Zip: 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: STEVE ORR D 04/29/2006