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May 22, 2003 8:00 am
Secretary of State

04-29-2003 90068 035 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000048681

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55043129

1. Entity Name
SUNSET HOLDINGS, INC.

Principal Place of Business	Mailing Address
417 ISLAND CIRCLE SARASOTA, FL 34242	417 ISLAND CIRCLE SARASOTA, FL 34242

2. Principal Place of Business	3. Mailing Address
POSTNET	POSTNET
Suite, Apt. #, etc.: 6094 14th St. W.	Suite, Apt. #, etc.: 6094 14th St W.
City & State: Bradenton, Fl	City & State: Bradenton, Fl
Zip: 34207 Country: Manatee	Zip: 34207 Country: Manatee

X CHECK HERE IF MAKING CHANGES

4. FEI Number: 30-0068167 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PARKER, THEODORE ESQUIRE
2033 MAIN ST, STE 100
SARASOTA, FL 34237

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number Is Not Acceptable)

City FL Zip Code

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 ______________________________________ DATE

[redacted]

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	D CAMPBELL, WILLIAM A 417 ISLAND CIRCLE SARASOTA, FL 34242	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAMPBELL, FAYE B 417 ISLAND CIRCLE SARASOTA, FL 34242	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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: Faye Campbell 4/25/03 941-727-8484

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #