2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: ZW

Apr 06, 2006 08:00 AM Secretary of State DOCUMENT # P02000079157 1. Entity Name SUN COVE MANAGEMENT, INC. Principal Place of Business Mailing Address 3601 19TH ST. NORTH 3601 19TH ST. NORTH ST. PETERSBURG, FL 33713 ST. PETERSBURG, FL 33713 04042006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 14-1838904 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MCSHANE, PATRICIA A 3601 19TH ST. NORTH DO NOT WRITE ST. PETERSBURG, FL 33713 IN THIS SPACE 6. 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_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 8. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 13 \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. n TITLE MCSHANE, PATRICIA A MAME STREET ADDRESS 3601 19TH ST. NORTH CDY-ST-70P ST. PETERSBURG, FL 33713 U00000494152 04/20/06-80035-002 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE me STREET ACCRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-2IP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under each; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Black 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered to the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Black 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered to the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Black 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Black 10 or Block 11 if changed.

FILED