

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096030

FILED
Jan 13, 2004
Secretary of State

Entity Name: SUN WEST SOLUTIONS, INC.

Current Principal Place of Business:

25359 E. MARION AVE.
PUNTA GORDA, FL 33950

New Principal Place of Business:

5265 DUNCAN RD.
PUNTA GORDA, FL 33950 US

Current Mailing Address:

P.O. BOX 380845
MURDOCK, FL 339380845

New Mailing Address:

P.O. BOX 380845
MURDOCK, FL 339380845 US

FEI Number: 56-2287065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIRSACK, MICHAEL R
1395 SOURWOOD CT
FT MYERS, FL 33917 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: PTD () Delete
Name: VIRSACK, MICHAEL R
Address: 1395 SOURWOOD CT
City-St-Zip: FT MYERS, FL 33917

Title: VSD () Delete
Name: MULVEHILL, PAUL J JR.
Address: 20343 WILKIE AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MICHAEL VIRSACK

PTD

01/13/2004

Electronic Signature of Signing Officer or Director

Date