

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022481

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** SUN INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

7009 DR. PHILLIPS BLVD.  
SUITE 110  
ORLANDO, FL 32819

**New Principal Place of Business:**

7208 W. SAND LAKE ROAD  
SUITE 300  
ORLANDO, FL 32819

**Current Mailing Address:**

7738 APPLE TREE CIRCLE  
ORLANDO, FL 32819

**New Mailing Address:**

7208 W. SAND LAKE ROAD  
SUITE 300  
ORLANDO, FL 32819

**FEI Number:** 57-1151877

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRANDT, JAMES  
7738 APPLE TREE CIRCLE  
ORLANDO, FL 32819 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BRANDT, JAMES  
**Address:** 7738 APPLE TREE CIRCLE  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** S  
**Name:** BRANDT, DEE  
**Address:** 7738 APPLE TREE CIRCLE  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** D  
**Name:** ROSENSTRAUCH, KATHLEEN B  
**Address:** 309 ARIEL DRIVE NE  
**City-St-Zip:** LEESBURG, VA 20176 US

I hereby 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 all other like empowered.

**SIGNATURE:** JAMES BRANDT

PRES

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date