2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2005
Secretary of State

DOCUMENT# P03000040384

Entity Name: SUNRISE FANTASY FLIGHTS, INC.

Current Principal Place of Business:

7223 CREEKWOOD CT.
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

7223 CREEKWOOD CT.
TAMPA, FL 33615

New Mailing Address:

FEI Number: 05-0565614 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAWRENCE, DAVID
7223 CREEKWOOD CT.
TAMPA, FL 33615 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: STD ( ) Delete
Name: LAWRENCE, DAVID
Address: 7223 CREEKWOOD CT.
City-St-Zip: TAMPA, FL 33615

Title: PD ( ) Delete
Name: GARDNER, DAVE
Address: 8102 SHELDON RD., #904
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete
Name: SEKORA, MELANIE
Address: 16302 EAST COURSE DR.
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change ( ) Addition
Name: GARDNER, DAVE
Address: 8102 SHELDON RD., #1104
City-St-Zip: TAMPA, FL 33615

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: DAVE GARDNER PD 01/08/2005

Electronic Signature of Signing Officer or Director — Date