

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073167

FILED
Jan 07, 2004
Secretary of State

Entity Name: SUNSHINE INSURANCE GROUP, INC.

Current Principal Place of Business:

931 VILLAGE BLVD.
SUITE 905-194
WEST PALM BEACH, FL 33409

Current Mailing Address:

931 VILLAGE BLVD.
SUITE 905-194
WEST PALM BEACH, FL 33409

New Principal Place of Business:

400 NORTH FLAGLER DRIVE
SUITE C
WEST PALM BEACH, FL 33401

New Mailing Address:

400 NORTH FLAGLER DRIVE
SUITE C
WEST PALM BEACH, FL 33401

FEI Number: 61-1452786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAMBINO, ANNE M
931 VILLAGE BLVD.
SUITE 905-194
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

GAMBINO, ANNE M
400 NORTH FLAGLER DRIVE
SUITE C
WEST PALM BEACH, FL 33401 US

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: ANNE GAMBINO, PRESIDENT

01/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: GAMBINO, ANNE
Address: 931 VILLAGE BLVD SUITE 905-194
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VP () Delete
Name: GAMBINO, ANTONIO
Address: 931 VILLAGE BLVD SUITE 905-194
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GAMBINO, ANNE
Address: 400 NORTH FLAGLER DRIVE SUITE C
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP (X) Change () Addition
Name: GAMBINO, ANTONIO
Address: 400 NORTH FLAGLER DRIVE SUITE C
City-St-Zip: WEST PALM BEACH, FL 33401

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: ANNE GAMBINO, PRESIDENT

PRES

01/07/2004

Electronic Signature of Signing Officer or Director

Date