2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 05, 2007
Secretary of State

DOCUMENT# P03000075257

Entity Name: SUNSHINE CAPITAL CORPORATION

Current Principal Place of Business:

1418 WOODSTREAM DR
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

1418 WOODSTREAM DR
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 57-1184986 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KELNER, LAWRENCE R
1418 WOODSTREAM DR
OLDSMAR, FL 34677 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: PRES ( ) Delete
Name: KELNER, BARBARA C PRES
Address: 1418 WOODSTREAM DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: VP ( ) Delete
Name: KELNER, LAWRENCE R VP
Address: 1418 WOODSTREAM DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: SECY ( ) Delete
Name: KELNER, BARBARA C SECY
Address: 1418 WOODSTREAM DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: KELNER, LAWRENCE R PRES
Address: 1418 WOODSTREAM DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: VP (X) Change ( ) Addition
Name: KELNER, PAULA L VP
Address: 1418 WOODSTREAM DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: SECY (X) Change ( ) Addition
Name: TARLTON, SYLVIE L SECY
Address: 1418 WOODSTREAM DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: VP ( ) Change (X) Addition
Name: CUMBIE, THOMAS VP
Address: 235 ARIANA BOULEVARD
City-St-Zip: AUBURNDALE, FL 33823

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LAWRENCE R. KELNER PRES 09/05/2007

Electronic Signature of Signing Officer or Director — Date