2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# P03000077840

Entity Name: SUNRISE HOMES REALTY, INC.

Current Principal Place of Business:

3658 ERINDALE DR
VALRICO, FL 33594

New Principal Place of Business:

3658 ERINDALE DR
VALRICO, FL 33596

Current Mailing Address:

3658 ERINDALE DR
VALRICO, FL 33594

New Mailing Address:

3658 ERINDALE DR
VALRICO, FL 33596

FEI Number: 20-0078911 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POPUVICH, GAIL M
3658 ERIN PALE DR.
VALRICO, FL 33596 US

Name and Address of New Registered Agent:

POPOVICH, GAIL M
3658 ERINDALE DR.
VALRICO, FL 33596 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: GAIL M POPOVICH 06/23/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: HASBINI, ALI
Address: 3658 ERINDALE DR
City-St-Zip: VALRICO, FL 33594

Title: V ( ) Delete
Name: APPLEYARD, ROBERT
Address: 3658 ERINDALE DR
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: HASBINI, ALI
Address: 3658 ERINDALE DR
City-St-Zip: VALRICO, FL 33596

Title: V (X) Change ( ) Addition
Name: APPLEYARD, ROBERT
Address: 3658 ERINDALE DR
City-St-Zip: VALRICO, FL 33596

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: GAIL M POPOVICH AGEN 06/23/2009
Electronic Signature of Signing Officer or Director Date