

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037248

FILED
Mar 29, 2009
Secretary of State

Entity Name: SUNDANCE BUG AND BUGGY, INC.

Current Principal Place of Business:

4815 HWY 92 WEST
PLANT CITY, FL 33566

New Principal Place of Business:

4815 HWY 92 WEST
PLANT CITY, FL 33567

Current Mailing Address:

4815 HWY 92 WEST
PLANT CITY, FL 33566

New Mailing Address:

4815 HWY 92 WEST
PLANT CITY, FL 33567

FEI Number: 20-0785603

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M ESQ
6152 DELANCEY STATION ST
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

CLARK, DAVID
4815 HWY 92 WEST
PLANT CITY, FL 33567 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: DAVID CLARK

03/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: CLARK, DAVID L
Address: 4815 HWY 92 WEST
City-St-Zip: PLANT CITY, FL 33566

Title: DVS () Delete
Name: CLARK, CHERYL A
Address: 4815 HWY 92 WEST
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: CLARK, DAVID L
Address: 4815 HWY 92 WEST
City-St-Zip: PLANT CITY, FL 33567

Title: DVS (X) Change () Addition
Name: CLARK, CHERYL A
Address: 4815 HWY 92 WEST
City-St-Zip: PLANT CITY, FL 33567

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: DAVID CLARK

DPT

03/29/2009

Electronic Signature of Signing Officer or Director

Date