2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000050608

FILED Apr 15, 2008 Secretary of State

| Entity Name: SUNRISE HOME BUILDERS, INC. | - |
|--|--|
| Current Principal Place of Business: | New Principal Place of Business: |
| 5293 CONSTITUTION ROAD CRESTVIEW, FL 32539 | |
| Current Mailing Address: | New Mailing Address: |
| 5293 CONSTITUTION ROAD CRESTVIEW, FL 32539 | |
| FEI Number: 54-2148094 FEI Number Applied For () FEI Number | mber Not Applicable () Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | Name and Address of New Registered Agent: |
| LAWHON, ROBIN O 5293 CONSTITUTION ROAD CRESTVIEW, FL 32539 US | |
| The above named entity submits this statement for the purpose on the State of Florida. | of changing its registered office or registered agent, or both, |
| SIGNATURE: | |
| Electronic Signature of Registered Agent | Date |
| Election Campaign Financing Trust Fund Contribution ($$). | |
| OFFICERS AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |
| Title: P () Delete Name: LAWHON, ROBERT S Address: 5293 CONSTITUTION ROAD | Title: P (X) Change () Addition Name: LAWHON, ROBIN S Address: 5293 CONSTITUTION ROAD |

City-St-Zip: CRESTVIEW, FL 32539 City-St-Zip: CRESTVIEW, FL 32539 VS () Delete Title: (X) Change () Addition LAWHON, ROBIN O LAWHON, STEVEN T Name: Name: Address: 5293 CONSTITUTION ROAD Address: 1316 NORTH DAVIS HWY CRESTVIEW, FL 32539 PENSACOLA, FL 32503 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition

Name: LAWHON, STEVEN T Name: Address: 5293 CONSTITUTION ROAD Address: City-St-Zip: CRESTVIEW, FL 32539 City-St-Zip:

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: ROBIN LAWHON Ρ 04/15/2008