## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000086719

Entity Name: SONSHINE HOME SERVICES, INC.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10992 NW 13TH COURT 5437 N.W. BRISCOE DR.

CORAL SPRINGS, FL 33071 US PORT ST. LUCIE, FL 34986 US

Current Mailing Address: New Mailing Address:

10992 NW 13TH COURT 5437 N.W. BRISCOE DR.

CORAL SPRINGS, FL 33071 US PORT ST. LUCIE, FL 34986 US

FEI Number: 20-2149100 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARRAGATO, CAROL

10992 NW 13TH COURT

CORAL SPRINGS, FL 33071 US

BARRAGATO, CAROL

5437 N. W. BRISCOE DR.

PORT ST. LUCIE, FL 34986 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: 04/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BARRAGATO, CAROL
Address: 10992 NW 13TH COURT

City-St-Zip: CORAL SPRINGS, FL 33071 US

 Title:
 ST ( ) Delete

 Name:
 BARRAGATO, FRANK C

 Address:
 10992 NW 13TH COURT

City-St-Zip: CORAL SPRINGS, FL 33071 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition

Name: BARRAGATO, CAROL Address: 5437 M.W. BRISCOE DR. City-St-Zip: PORT ST. LUCIE, FL 33071 US

Title: ST (X) Change ( ) Addition

Name: BARRAGATO, FRANK C
Address: 10992 NW 13TH COURT
City-St-Zip: CORAL SPRINGS, FL 34986 US

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: CAROL BARRAGATO PRES 04/27/2007