

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000056761

1. Entity Name
SUNNYSIDE PROPERTIES TOO, INC.



Principal Place of Business
**10912 N 56TH ST
TEMPLE TERR, FL 33617-3004**

Mailing Address
**10912 N 56TH ST
TEMPLE TERR, FL 33617-3004**



01162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2651702

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GOSS, TRENT C
10912 N 56TH ST
TEMPLE TERR, FL 33617-3004**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

U000000625505
02/14/07 00070-000 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GOSS, TRENT C 10912 N 56TH ST TEMPLE TERR, FL 336173004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GOSS, JAMES C 10912 N 56TH ST TEMPLE TERR, FL 336173004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MC DUFFIE, TRACY 10912 N 56TH ST TEMPLE TERR, FL 336173004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FRIDELLA, TRISHA 10912 N 56TH ST TEMPLE TERR, FL 336173004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 18 2007
Date

Daytime Phone #