

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000118439

**FILED**  
**Jul 19, 2008**  
**Secretary of State**

**Entity Name:** SUN TREASURE COAST INC.

**Current Principal Place of Business:**

272 SW EGRET LANDING  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

272 SW EGRET LANDING  
PORT ST. LUCIE, FL 34953

**New Mailing Address:**

FEI Number: 76-0802324

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FERRETTI, CHRISTOPHER  
272 SW EGRET LANDING  
PORT ST. LUCIE, FL 34953 US

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

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: CHRISTOPHER FERRETTI

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: PD ( ) Delete  
Name: FERRETTI, CHRISTOPHER  
Address: 272 SW EGRET LANDING  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VPD ( ) Delete  
Name: FERRETTI, ROSANNA  
Address: 272 SW EGRET LANDING  
City-St-Zip: PORT ST LUCIE, FL 34953

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: FERRETTI, ROSANNA  
Address: 272 SW EGRET LANDING  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VPD (X) Change ( ) Addition  
Name: FERRETTI, CHRISTOPHER  
Address: 272 SW EGRET LANDING  
City-St-Zip: PORT ST LUCIE, FL 34953

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: ROSANNA FERRETTI

PD

07/19/2008

Electronic Signature of Signing Officer or Director

Date