

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000015732

FILED
May 07, 2009
Secretary of State

Entity Name: SUNSTATE PROTECTION SERVICES INC

Current Principal Place of Business:

8624 VENEZIA DR UNIT 2417
ORLANDO, FL 32810

New Principal Place of Business:

378 CENTERPOINTE CIRCLE
1272
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

8624 VENEZIA DR UNIT 2417
ORLANDO, FL 32810

New Mailing Address:

378 CENTERPOINTE CIRCLE
1272
ALTAMONTE SPRINGS, FL 32701

FEI Number: 20-4181263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKSON, RHONDA
8624 VENEZIA DR UNIT 2417
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

DICKSON, RHONDA
378 CENTERPOINTE CIRCLE
ALTAMONTE SPRINGS, FL 32701 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:

05/07/2009

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: VP () Delete
Name: BARBER, BUDDY R
Address: 8624 VENEZIA DR UNIT 2417
City-St-Zip: ORLANDO, FL 32810

Title: P () Delete
Name: DICKSON, RHONDA K
Address: 8624 VENEZIA DR UNIT 2417
City-St-Zip: ORLANDO, FL 32810

Title: T () Delete
Name: DICKSON, CHARLES B
Address: 8624 VENEZIA DR UNIT 2417
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BARBER, BUDDY R
Address: 378 CENTERPOINTE CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: P (X) Change () Addition
Name: DICKSON, RHONDA K
Address: 378 CENTERPOINTE CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T (X) Change () Addition
Name: DICKSON, CHARLES B
Address: 378 CENTERPOINTE CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: RHONDA K DICKSON

PRES

05/07/2009

Electronic Signature of Signing Officer or Director

Date