

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000018706

FILED
Apr 16, 2009
Secretary of State

Entity Name: SUN CITY COMMUNICATIONS INC

Current Principal Place of Business:

1708 S BYRON BUTLER PKWY
SUITE
PERRY, FL 32348

New Principal Place of Business:

1708 S BYRON BUTLER PKWY
SUITE J
PERRY, FL 32348

Current Mailing Address:

1708 S BYRON BUTLER PKWY
SUITE
PERRY, FL 32348

New Mailing Address:

1708 S BYRON BUTLER PKWY
SUITE J
PERRY, FL 32348

FEI Number: 68-0667835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKS, BARBARA
1708 S BYRON BUTLER PKWY
SUITE
PERRY, FL 32348 US

Name and Address of New Registered Agent:

NOLEN, B
1708 S BYRON BUTLER PKWY
SUITE J
PERRY, FL 32348 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: B NOLEN

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NOLEN WEEKS, BARBARA
Address: 1708 S BYRON BUTLER PKWY SUITE J
City-St-Zip: PERRY, FL 32348

Title: VP () Delete
Name: NOLEN, PATRICIA
Address: 1708 S BYRON BUTLER PKWY SUITE J
City-St-Zip: PERRY, FL 32348

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEEKS, DANIEL
Address: 1708 S BYRON BUTLER PKWY SUITE J
City-St-Zip: PERRY, FL 32348

Title: VP (X) Change () Addition
Name: NOLEN, PATRICIA B
Address: 1708 S BYRON BUTLER PKWY SUITE J
City-St-Zip: PERRY, FL 32348

Title: T () Change (X) Addition
Name: WEEKS, JESSICA D
Address: 1708 S BYRON BUTLER PKWY
City-St-Zip: PERRY, FL 32348 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: DANIEL WEEKS

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date