## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000032988

Entity Name: SUNRISE CITY ENTERPRISES INC.

FILED Apr 30, 2009 Secretary of State

| Current Principal Place of Business:   |  |                                  | New Princi  | New Principal Place of Business:   |  |  |
|--|--|----------------------------------|---|--|--|--|
| 9815 SOUTH OCEAN DRIVE   |  |                                  |   |  |  |  |
| #2<br>JENSEN BEACH, FL 34957   |  |                                  |   |  |  |  |
| Current Mailing Address:   |  |                                  | New Mailin  | New Mailing Address:   |  |  |
| 9815 SOUTH OCEAN DRIVE   |  |                                  |   |  |  |  |
| #2<br>JENSEN BEACH, FL 34957   |  |                                  |   |  |  |  |
| FEI Number: 20-4442611 FEI Number Applied For ( ) FEI Num  |  | Number Not Appli                 | nber Not Applicable ( ) Certificate of Status Desired ( ) |  |  |  |
| Name and   | Address of C   | Current Registered Agent:        | Name and  | Address of New Registered Agent:   |  |  |
| BERNARD, ROBERT TD<br>9815 SOUTH OCEAN DRIVE   |  |                                  |   |  |  |  |
| #2<br>JENSEN BEACH, FL 34957 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:   |  |                                  |   |  |  |  |
|  | Electror   | ic Signature of Registered Agent |   | Date   |  |  |
| Election Campaign Financing Trust Fund Contribution ( ).   |  |                                  |   |  |  |  |
| OFFICERS AND DIRECTORS:  |  |                                  | ADDITIONS   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | SD ( )<br>ELLINGSON, B<br>1643 NE 24TH<br>JENSEN BEAC  | STREET                           | Title:<br>Name:<br>Address:<br>City-St-Zip:               | SD (X) Change ( ) Addition<br>ELLINGSON, BLAINE SD<br>1643 NE 24TH STREET<br>JENSEN BEACH, FL 34957 US             |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | SD ( )<br>ELLINGSON, D<br>1643 NE 24TH<br>JENSEN BEAC  | STREET                           | Title:<br>Name:<br>Address:<br>City-St-Zip:               | VPD (X) Change ( ) Addition<br>ELLINGSON, DONCELLA VPD<br>1643 NE 24TH STREET<br>JENSEN BEACH, FL 34957 US         |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | TURNER, STAN<br>17227 113A ST                          |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip:               | SD (X) Change ( ) Addition<br>TURNER, STANLEY SD<br>17227 113A STREET NW<br>EDMONTON, ALBERTA T5X544, AB T5X5Y4 CA |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | TURNER, DELY<br>17227 113A ST                          |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip:               | SD (X) Change ( ) Addition<br>TURNER, DELYNN SD<br>17227 113A STREET NW<br>EDMONTON, ALBERTA T5X544, AB T5X5Y4 CA  |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | BERNARD, RO  | ETON TERRACE                     | Title:<br>Name:<br>Address:<br>City-St-Zip:               | TD (X) Change ( ) Addition<br>BERNARD, ROBERT TD<br>2750 SE CLARETON TERRACE<br>PORT ST LUCIE, FL 34952 US         |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | SD ( )<br>BUNSO, KRIST<br>2766 SE GARD<br>STUART, FL 3 | EN STREET                        | Title:<br>Name:<br>Address:<br>City-St-Zip:               | PD (X) Change ( ) Addition<br>DOLGOPOL, DARWIN D PD<br>2927 CALDER AVE.<br>SASKATOON, SK 7SJ4X2 CA                 |  |  |

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: BLAINE ELLINGSON SD 04/30/2009