2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008
Secretary of State

DOCUMENT# P06000113392

Entity Name: SUNDOWN BOBCAT SERVICE INC.

Current Principal Place of Business:

17791 44TH PL N
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

Current Mailing Address:

17791 44TH PL N
LOXAHATCHEE, FL 33470 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD., SUITE 101
TALLAHASSEE, FL 323012960 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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DE LA ROSA, FRANCISCO
Address: 17791 44TH PL N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S ( ) Delete
Name: DE LA ROSA, FRANCISCO
Address: 17791 44TH PL N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D ( ) Delete
Name: DE LA ROSA, FRANCISCO
Address: 17791 44TH PL N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: V ( ) Delete
Name: DE LA ROSA, BRETT
Address: 17791 44TH PL N, LOXAHATCHEE, FL 33470
City-St-Zip: LOXAHATCHEE, FL 33470

Title: T ( ) Delete
Name: DE LA ROSA, PRISCILLA
Address: 17791 44TH PL N, LOXAHATCHEE, FL 33470
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: DE LA ROSA, BRETT
Address: 17791 44TH PL N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: T (X) Change ( ) Addition
Name: DE LA ROSA, PRISCILLA
Address: 17791 44TH PL N
City-St-Zip: LOXAHATCHEE, FL 33470

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: FRANCISCO DE LA ROSA P 01/22/2008
Electronic Signature of Signing Officer or Director Date