

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90203 046 ***150.00

60035179

DOCUMENT # P07000116434				Secretary of State 04-30-2008 90203 046 ***150.00	
1. Entity Name SUNSET REALTY ADVISORS, INC.					
Principal Place of Business 8317 FRONT BEACH RD. SUITE #12 PANAMA CITY BEACH, FL 32407		Mailing Address 8317 FRONT BEACH RD. SUITE #12 PANAMA CITY BEACH, FL 32407			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		60035179	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04282008 Chg-P CR2E034 (12/06)	
City & State		City & State		4. FEI Number 42-1743760 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
TUCKER, SHAYE B 105 SEACLUSION DR PANAMA CITY BEACH, FL 32413			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City	FL	Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BARBER, GARY D	NAME			
STREET ADDRESS	8317 FRONT BEACH RD. SUITE #12	STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32407	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BEVIS, MICHELLE	NAME			
STREET ADDRESS	8317 FRONT BEACH RD. SUITE #12	STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32407	CITY-ST-ZIP			
TITLE	DPVS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	TUCKER, JAMES R	NAME			
STREET ADDRESS	8317 FRONT BEACH RD. SUITE #12	STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32407	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: James R. Tucker		Date _____ Daytime Phone # _____			