

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000103247

**Entity Name:** SUNSHINE FINANCING INC

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

519 PALM TRAIL  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

519 PALM TRAIL  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 26-3763341

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHUMWAY, TODD  
519 PALM TRAIL  
DELRAY BEACH, FL 33483 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

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: SHUMWAY, TODD  
Address: 519 PALM TRAIL  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D  
Name: COFFEY, BRUCE R  
Address: 1349 SE 8TH ST  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: PRES  
Name: HOARD, SCOTT D  
Address: 1730 WINDSOR COVE  
City-St-Zip: ALPHARETTA, GA 30004

I hereby 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 all other like empowered.

SIGNATURE: TODD SHUMWAY

VP

01/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date