

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08793

FILED
Apr 15, 2008
Secretary of State

Entity Name: SUNSHINE MORTGAGE CORPORATION OF GEORGIA

Current Principal Place of Business:

2401 LAKE PARK DRIVE
SUITE 300
SMYRNA, GA 30080 US

New Principal Place of Business:

Current Mailing Address:

2401 LAKE PARK DR
SUITE 300
SMYRNA, GA 30080

New Mailing Address:

FEI Number: 58-1424004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR STE 4
WESTON, FL 33331 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: CEO (X) Delete
Name: RHINEHEART, GARY
Address: 2401 LAKE PARK DRIVE, STE. 300
City-St-Zip: SMYRNA, GA 30080

Title: VS () Delete
Name: BLANCHARD, ELIZABETH
Address: 2401 LAKE PARK DRIVE, STE. 300
City-St-Zip: SMYRNA, GA 30080

Title: EV () Delete
Name: COPELAND, STEVE
Address: 2401 LAKE PARK DRIVE, STE. 300
City-St-Zip: SMYRNA, GA 30080

Title: P () Delete
Name: POWELL, FRED
Address: 2401 LAKE PARK DRIVE STE 300
City-St-Zip: SMYRNA, GA 30080

Title: VP () Delete
Name: GASSERT, STEPHEN
Address: 2401 LAKE PARK DRIVE STE 300
City-St-Zip: SMYRNA, GA 30080

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: PT (X) Change () Addition
Name: POWELL, FRED
Address: 2401 LAKE PARK DRIVE STE 300
City-St-Zip: SMYRNA, GA 30080

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

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: FRED POWELL

PT

04/15/2008

Electronic Signature of Signing Officer or Director

_____ Date