## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P94000039285

1. Entity Name

SUNBEAM MORTGAGE CORPORATION



FILED Apr 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2531 LANDMARK DR 202 2531 LANDMARK DR

202

CLEARWATER, FL 33761

CLEARWATER, FL 33761



DO NOT WRITE IN THIS SPACE

04162007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3244552

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

POLACEK, DONNA 1709 TALL PINE CIRCLE SAFETY HARBOR, FL 34695

## DO NOT WRITE IN THIS SPACE

				114	THIS STAGE
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					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST POLACEK, DONNA 1709 TALL PINE CIRCLE SAFETY HARBOR, FL 34695				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				in '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000717140 04/30/07-80036-007 150.00
TITLE					

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

STREET ADDRESS

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4-17-07

787-796-7040