## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 23, 2008 08:00 AN Secretary of State

ANNOAL REPORT		
DOCUMENT # P94000068466  1. Entity Name SUNSET KEY DEVELOPMENT CORP.		
Principal Place of Business  1001 E ATLANTIC AVE STE 202 DELRAY BEACH, FL 33483 US	Mailing Address 1000 MARKET STREET BLDG 1 PORTSMOUTH, NH 03802	US
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## No Chg-P CR2E034 (11/05) 01212008 Applied For 4. FEI Number 65-0571152 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000915034 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME WALSH, MARK STREET ADDRESS 1001 E ATLANTIC AVE STE 202 CITY-ST-ZIP DELRAY BEACH, FL 33483 TITLE WALSH, MICHAEL NAME STREET ADDRESS 1001 E ATLANTIC AVE STE 202 CITY-ST-ZIP DELRAY BEACH, FL 33483 TITLE WALSH, WILLIAM NAME 1000 MARKET STREET BLDG 1 STREET ADDRESS DO NOT WRI CITY-ST-ZIP PORTSMOUTH, NH IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 apport 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 true exprise of execute his 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 a deducers. With all differences of the changed of the changed of the change of the chan

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date ....

Daytime Phone # 21.00