2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000039258

Entity Name: SUN CAPITAL PARTNERS, INC.

FILED Jun 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5200 TOWN CENTER CIRCLE SUITE 600 BOCA RATON, FL 33486 **New Mailing Address: Current Mailing Address:** 5200 TOWN CENTER CIRCLE SUITE 600 BOCA RATON, FL 33486 FEI Number: 65-0586694 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DCFO () Delete () Change () Addition KROUSE, RODGER Name: Name: 5200 TOWN CENTER CIRCLE STE 600 Address: Address: City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: DCEO Title: Title: () Delete () Change () Addition Name: LEDER, MARC J Name: 5200 TOWN CENTER CIRCLE STE 600 Address: Address: BOCA RATON, FL 33486 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: VAS () Delete **VPAS** HAJDUCH, MARK HAJDUCH, MARK Name: Name: 5200 TOWN CENTER CIRCLE STE 600 5200 TOWN CENTER CIRCLE STE 600 Address: Address: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: Title: MDAS () Delete Title: SEC (X) Change () Addition COUCH, C. DERYL GORDON, JANINE E Name: Name: Address: 5200 TOWN CENTER CIRCLE STE 600 Address: 5200 TOWN CENTER CIRCLE STE 600 City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33486 Title: DCFO Title: (X) Change () Addition () Delete CALHOUN, KEVIN Name: CALHOUN, KEVIN Name: 5200 TOWN CENTER CIRCLE STE 600 Address: 5200 TOWN CENTER CIRCLE STE 600 Address: City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33486 Title: () Delete Title: (X) Change () Addition MCCONVERY, MICHAEL Name: Name: MCCONVERY, MICHAEL 5200 TOWN CENTER CIRCLE STE 600 5200 TOWN CENTER CIRCLE STE 600 Address: Address: City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33486

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: JENNIFER SPANGLER POA 06/19/2008