

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000067719

FILED  
Jan 09, 2006  
Secretary of State

Entity Name: SUNSHINE PARTNERS DEVELOPMENT CORP. I

## Current Principal Place of Business:

407 IDLEWYLD  
FT LAUDERDALE, FL 33301

## New Principal Place of Business:

## Current Mailing Address:

407 IDLEWYLD  
FT LAUDERDALE, FL 33301

## New Mailing Address:

FEI Number: 65-0607838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORGAN, WALTER L  
315 NE 3RD AVE, SUITE 200  
FT LAUDERDALE, FL 33301 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: PD ( ) Delete  
Name: STURGIS, GREGORY  
Address: 407 IDLEWYLD  
City-St-Zip: FT LAUDERDALE, FL

Title: VPD ( ) Delete  
Name: BRAUSER, MICHAEL  
Address: 3164 N.E. 31ST AVE  
City-St-Zip: LIGHTHOUSE POINT, FL

Title: VPD ( ) Delete  
Name: ZALCBURG, IRWIN  
Address: 52118 LAKE PARK DRIVE  
City-St-Zip: GRAND BEACH, MI

Title: SD ( ) Delete  
Name: SMITH, BRUCE R  
Address: 316 BAYBERRY DRIVE  
City-St-Zip: FT LAUDERDALE, FL

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GREG STURGIS

PD

01/09/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date