2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# P96000095511

Entity Name: SONSHINE DRYWALL & METAL FRAMING, INC.

Current Principal Place of Business:

100 BUSINESS CENTER STE 1
SUITE 1
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

100 BUSINESS CENTER STE 1
SUITE 1
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3500612 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMPE, BRUCE
18 WINCHESTER
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

LAMPE, BRUCE A
18 WINCHESTER
ORMOND BEACH, FL 32176 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: BRUCE A. LAMPE 04/17/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LAMPE, BRUCE
Address: 18 WINCHESTER ROAD
City-St-Zip: ORMOND BEACH, FL 32176

Title: T ( ) Delete
Name: LAMPE, WAYNE
Address: 9 BLACKBURN PLACE
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Delete
Name: NICHOLS, CHARLES
Address: 7 TRACEWAY COURT
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LAMPE, BRUCE A
Address: 18 WINCHESTER ROAD
City-St-Zip: ORMOND BEACH, FL 32176

Title: VP (X) Change ( ) Addition
Name: NICHOLS, CHARLES
Address: 268 SPREADING OAK LANE
City-St-Zip: ORMOND BEACH, FL 32174

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: BRUCE A. LAMPE PRES 04/17/2009
Electronic Signature of Signing Officer or Director Date