## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000035924

Entity Name: SUN TUNNEL SKYLIGHTS T.F.L.E., INC.

FILED Jan 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

981 INNSWOOD CT 2275 WEKIVA VILLAGE LN LONGWOOD, FL 32779 APOPKA, FL 32703

Current Mailing Address: New Mailing Address:

981 INNSWOOD CT PO 521118

LONGWOOD, FL 32779 LONGWOOD, FL 32752

FEI Number: 59-3450767 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:

BREEN, MARIE-JOSE'
981 INNSWOOD CT
LONGWOOD, FL 32779 US

BREEN, MARIE-JOSE'
2275 WEKIVA VILLAGE LN
APOPKA, FL 32703 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: 01/15/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 D
 ( ) Delete

 Name:
 BREEN, MARIE-JOSE'

 Address:
 981 INNSWOOD CT

Address: 981 INNSWOOD CT City-St-Zip: LONGWOOD, FL 32779

 Title:
 DVP
 ( ) Delete

 Name:
 BREEM, WILLIAM

 Address:
 981 INNSWOOD CRT

 City-St-Zip:
 LONGWOOD, FL 32779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition

 Name:
 BREEN, MARIE-JOSE'

 Address:
 2275 WEKIVA VILLAGE LN

 City-St-Zip:
 APOPKA, FL 32703

Title: DVP (X) Change () Addition

Name: BREEN, WILLIAM
Address: 2275 WEKIVA VILLAGE LN
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM BREEN DVP 01/15/2004