## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000098794

FILED Apr 26, 2007 Secretary of State

| Entity Nam  | ne: SST PROP  | ERTIES, INC.   |   |   |                                  |      |
|---|---|--|---|---|----------------------------------|------|
| Current Principal Place of Business:                        |   |  | New Principal Place of Business:            |   |                                  |      |
| 2710 ALTERNATE 19 NORTH<br>STE 402<br>PALM HARBOR, FL 34683 |   |  |   |   |                                  |      |
| Current Mailing Address:                                    |   |  | New Mailing Address:                        |   |                                  |      |
| 2710 ALTERNATE 19 NORTH<br>STE 402<br>PALM HARBOR, FL 34683 |   |  |   |   |                                  |      |
| FEI Number: 59-3479205 FEI Number Applied For ( )           |   | FEI Number Not App                                       | licable ( )                                 | Certificate of Status Desired ( )                 | į                                |      |
| Name and  | Address of Cu   | rrent Registered Agent:                                  | Name and                                    | Name and Address of New Registered Agent:         |                                  |      |
| 2708 ALT.   | WALTER W<br>19 NORTH, SUI<br>BOR, FL 34683                    |  |   |   |                                  |      |
| The above in the State                                      |   | bmits this statement for the pu                          | rpose of changing i                         | ts registered o                                   | office or registered agent, or b | oth, |
| SIGNATUR  |   | <u> </u>   |   |   |                                  |      |
| Flection Cam  |   | Signature of Registered Ager rust Fund Contribution ( ). | nt  |   | Date                             |      |
|   | AND DIRECTO   | `,   | ADDITION                                    | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:      |                                  |      |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                 | DP () D<br>SCHUMACHER, E<br>3564 WOODRIDG<br>PALM HARBOR, F   | OONALD J<br>GE PLACE                                     | Title:<br>Name:<br>Address:<br>City-St-Zip: | DP (X<br>SCHUMACHER<br>2835 COBBLE<br>PALM HARBOR | STONE DRIVE                      |      |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                 | DVP () D<br>DUGAN, MICHAEI<br>2119 CROSBY R<br>WAYZATA, MN 5  | _<br>DAD   | Title:<br>Name:<br>Address:<br>City-St-Zip: | (   | ) Change ( ) Addition            |      |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                 | DT () D<br>SNYDER, RICHAI<br>643 BELTED KIN<br>PALM HARBOR, I | RD A<br>GFISHER DRIVE NORTH                              | Title:<br>Name:<br>Address:<br>City-St-Zip: | (   | ) Change ( ) Addition            |      |

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: DONALD J. SCHUMACHER **PRES** 04/26/2007