

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000080778

FILED
Apr 03, 2009
Secretary of State

Entity Name: SUN COUNTRY/ROBINSON BUILDERS, INC.

Current Principal Place of Business:

11 PECAN COURSE CIRCLE
OCALA, FL 34472

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 830098
OCALA, FL 34483

New Mailing Address:

FEI Number: 59-3553539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, BOBBY
3862 NE 5TH TERR
OCALA, FL 34479 US

Name and Address of New Registered Agent:

ROBINSON, BOBBY
53 HEMLOCK TERRACE
OCALA, FL 34472 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:

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ROBINSON, BOBBY
Address: 3862 NE 5TH TERR
City-St-Zip: OCALA, FL 34479

Title: VS () Delete
Name: ROBINSON, DORI
Address: 3862 NE 5TH TERR
City-St-Zip: OCALA, FL 34479

Title: D () Delete
Name: ROBINSON, DANNY
Address: 1491 NE 167TH LANE
City-St-Zip: CITRA, FL 32113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: ROBINSON, BOBBY
Address: 53 HEMLOCK TERRACE
City-St-Zip: OCALA, FL 34472

Title: VS (X) Change () Addition
Name: ROBINSON, DORI
Address: 53 HEMLOCK TERRACE
City-St-Zip: OCALA, FL 34472

Title: D (X) Change () Addition
Name: ROBINSON, DANNY
Address: 6500 NW 61ST LANE
City-St-Zip: OCALA, FL 34482

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: BOBBY ROBINSON

PT

04/03/2009

Electronic Signature of Signing Officer or Director

Date