

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000009879

Entity Name: SUN BAY HOMES CORP.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

13902 NORTH DALE MABRY
252
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

PO BOX 2412
BRANDON, FL 33509

New Mailing Address:

FEI Number: 59-3548922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLAZO, EDGARDO A
1512 LAKEHURST WAY
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

COLLAZO, EDGARDO A
PO BOX 2412
BRANDON, FL 33509 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:

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AGRESAR, RANIER L MR.
Address: PO BOX 2412
City-St-Zip: BRANDON, FL 33509

Title: VPD () Delete
Name: COLLAZO, EDGARDO A MR.
Address: PO BOX 2412
City-St-Zip: BRANDON, FL 33509

Title: TRS () Delete
Name: AGRESAR, RANIER L MR.
Address: PO BOX 2412
City-St-Zip: BRANDON, FL 33509

Title: SEC () Delete
Name: COLLAZO, EDGARDO A MR.
Address: PO BOX 2412
City-St-Zip: BRANDON, FL 33509

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 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: EDGARDO COLLAZO

VPD

04/25/2005

Electronic Signature of Signing Officer or Director

Date