

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000068646

Entity Name: SUN-ROBIN SALES,INC.

FILED
Apr 09, 2008
Secretary of State

Current Principal Place of Business:

11315 WAGON TRAIL RUN
LITHIA, FL 33547

New Principal Place of Business:

Current Mailing Address:

11315 WAGON TRAIL RUN
LITHIA, FL 33547

New Mailing Address:

FEI Number: 59-3590279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, JAMES E CHAIRMA
11315 WAGON TRAIL RUN
LITHIA, FL 33547 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CTD () Delete
Name: ROBINSON, JAMES E
Address: 11315 WAGON TRAIL RUN
City-St-Zip: LITHIA, FL 33547

Title: SD () Delete
Name: ROBINSON, PATRICIA J
Address: 11315 WAGON TRAIL RUN
City-St-Zip: LITHIA, FL 33547

Title: D () Delete
Name: ROBINSON, MARK E
Address: 5908 PHOEBENEST DRIVE
City-St-Zip: LITHIA, FL 33547

Title: P,D () Delete
Name: ROBINSON, DAVID J
Address: 5726 TANGER LAKE RD
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ROBINSON, MARK E
Address: 17535 BLEDSOE LOOP
City-St-Zip: LITHIA, FL 33547

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: JAMES E. ROBINSON

C

04/09/2008

Electronic Signature of Signing Officer or Director

Date