

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000082910

Entity Name: SUNSHINE STRUCTURES, INC.

FILED  
Jan 14, 2009  
Secretary of State

## Current Principal Place of Business:

5570 LEE ST, 12  
LEHIGH ACRES, FL 33971

## New Principal Place of Business:

## Current Mailing Address:

5570 LEE ST, 12  
LEHIGH ACRES, FL 33971

## New Mailing Address:

FEI Number: 65-1158948      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

STUART, ERNEST A V/D  
5565 LEE ST. #1  
LEHIGH ACRES, FL 33971      US

## Name and Address of New Registered Agent:

STUART, ERNEST A V/D  
5570 LEE ST. #12  
LEHIGH ACRES, FL 33971      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:

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V/D ( ) Delete  
Name: JOHNSTON, RICHARD C VP  
Address: 1349 WALES DRIVE  
City-St-Zip: FT. MYERS, FL 33901 US

Title: S/D ( ) Delete  
Name: STUART, ERNEST A VP  
Address: 10611 WINDING STREAM WAY  
City-St-Zip: BRADENTON, FL 34211 US

Title: V/D ( ) Delete  
Name: DEMINT, NICHOLAS M VP  
Address: 19551 FREEMAN DRIVE  
City-St-Zip: N. FORT MYERS, FL 33903 US

Title: C/D ( ) Delete  
Name: WILSON, RORIE C P  
Address: 6583 PLANTATION PINES BLVD  
City-St-Zip: FORT MYERS, FL 33912 US

## 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 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: ERNEST A STUART

VP

01/14/2009

Electronic Signature of Signing Officer or Director

Date