

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S06024

Entity Name: SUNRISE ST. PETE., INC.

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

LIGHTHOUSE CROSSINGS SHIPPING CTR
3993 TYRONE BLVD STE 304
ST. PETERSBURG, FL 337094106

New Principal Place of Business:

Current Mailing Address:

LIGHTHOUSE CROSSINGS SHIPPING CTR
3993 TYRONE BLVD STE 304
ST. PETERSBURG, FL 337094106

New Mailing Address:

FEI Number: 59-3035943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSC, PIERRE
LIGHTHOUSE CROSSING SHOPPING CENTER
3993 TYRONE BLVD.
ST. PETERSBURG, FL 33703 US

Name and Address of New Registered Agent:

BOSC, PIERRE
LIGHTHOUSE CROSSING SHOPPING CENTER
3993 TYRONE BLVD. SUITE 304
ST. PETERSBURG, FL 33709 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:

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOSC, PIERRE
Address: 3993 TYRONE BLVD.
City-St-Zip: ST. PETERSBURG, FL

Title: VP () Delete
Name: BOSC, NICOLE
Address: 3993 TYRONE BLVD
City-St-Zip: ST PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOSC, PIERRE
Address: 3993 TYRONE BLVD. SUITE 304
City-St-Zip: ST. PETERSBURG, FL 33709

Title: VP (X) Change () Addition
Name: BOSC, NICOLE
Address: 3993 TYRONE BLVD SUITE 304
City-St-Zip: ST PETERSBURG, FL 33709

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: NICOLE BOSC

VP

03/25/2009

Electronic Signature of Signing Officer or Director

Date