

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000074812

**FILED  
Feb 21, 2015  
Secretary of State  
CC7799693016**

**Entity Name:** SUNBURST FL CORPORATION

**Current Principal Place of Business:**

136 S. COMMERCIAL STREET  
COLEMAN, FL 33521

**Current Mailing Address:**

P.O. BOX 734  
COLEMAN, FL 33521

**FEI Number: 86-1149132**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HUFF, BARBARA M  
136 S. COMMERCIAL STREET  
COLEMAN, FL 33521 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PS  
Name HUFF, BARBARA M  
Address PO BOX 734  
City-State-Zip: COLEMAN FL 33521

Title V  
Name LAKER, CARROL A  
Address PO BOX 734  
City-State-Zip: COLEMAN FL 33521

Title T  
Name GRIES, JACK L  
Address PO BOX 734  
City-State-Zip: COLEMAN FL 33521

*I hereby 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 all other like empowered.*

**SIGNATURE: BARBARA M HUFF**

**PRES/SEC**

**02/21/2015**

Electronic Signature of Signing Officer/Director Detail

Date