## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H62601

(0)

SUN VILLAGE HOMES, INC. Principal Place of Business Mailing Address 1350/1360 W. 318T STREET 1350/1360 W. 31ST STREET HIALEAH FL 33012 HIALEAH FL 33012 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/18/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2549544 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Žip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B**1 Name CARLSON, RUTH 1350 - 1360 W. 31 STREET 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33012 83 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typod or printed name of regent rest ament and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change \_\_\_ Addit on 1.110 LE CARLSON, RUTH NAME 1.2 NAME 955 HUNTINGLODGE DR. STREET ADDRESS 13 STREET ADDRESS MIAMI SPGS. FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIF DELETE TITLE 21 TITLE ☐ Change Addition NAME 2.2 NAM5 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 City - \$1 - 201 DELETE TITLE Change naitibbA ... 3.1 7111.8 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CHY - ST - ZIP DELETE Change Addition TITLE 4.1 HILE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE \_\_\_ Change \_\_\_ Addit-on TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-ST-7iP DELFTÉ TITLE ☐ Change Addition 6.1 100 F

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if cyanger, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CHY - S1 - ZIP

08 3

**FILED** 

Jan 15 1998 8:00am

Secretary of State

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