

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

FILED

**Feb 12 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000071498 (8)

1. Corporation Name
SUN LAND ACQUISITIONS, INC.



Principal Place of Business 4500 PGA BLVD. SUITE 400 PALM BEACH GARDENS FL 33418	Mailing Address 4500 PGA BLVD. SUITE 400 PALM BEACH GARDENS FL 33418-3965
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3. Date Incorporated or Qualified 10/14/1993	3a. Date of Last Report 03/12/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	4. FEI Number 65-0447667	Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

**DIVOSTA, OTTO B
4500 PGA BLVD.
SUITE 400
PALM BEACH GARDENS FL 33418**

10. Name and Address of New Registered Agent

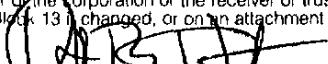
B1 Name	
B2 Street Address (P.O. Box Number is Not Acceptable)	
B3	
B4 City	FL
B5 Zip Code	

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 agent, 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 _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	V/AT ☐ Change ☒ Addition
NAME	DIVOSTA, OTTO B	1.2 NAME	Galui, Judith M.
STREET ADDRESS	4500 PGA BLVD., SUITE 400	1.3 STREET ADDRESS	4500 PGA Boulevard, Suite 400
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	1.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33418
TITLE	☐ DELETE	2.1 TITLE	V/AS ☐ Change ☒ Addition
NAME		2.2 NAME	Stephanos, Diane L.
STREET ADDRESS		2.3 STREET ADDRESS	4500 PGA Boulevard, Suite 400
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Palm Beach Gardens, Florida 33418
TITLE	☐ DELETE	3.1 TITLE	V ☐ Change ☒ Addition
NAME		3.2 NAME	Floyd, Cathy D.
STREET ADDRESS		3.3 STREET ADDRESS	4500 PGA Boulevard, Suite 400
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Palm Beach Gardens, Florida 33418
TITLE	☐ DELETE	4.1 TITLE	V ☐ Change ☒ Addition
NAME		4.2 NAME	DiVosta, Guy M.
STREET ADDRESS		4.3 STREET ADDRESS	4500 PGA Boulevard, Suite 400
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Palm Beach Gardens, Florida 33418
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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, changed, or on an attachment with an address.

SIGNATURE:  **Otto B. DiVosta** **1/20/97** **(561) 627-2112**

CR2E034 (9/96)