## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 19, 2004 8:00 am Secretary of State **DOCUMENT # 232035** 1. Entity Name 04-19-2004 90246 020 \*\*\*158.75 SUNRISE GOLF DEVELOPMENT CORP. Principal Place of Business Mailing Address 1096 SUNSET STRIP 1096 SUNSET STRIP 101001101 SUNRISE FL 33313 SUNRISE FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State 4. FEI Number City & State Applied For 59-0897619 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GRIFFITH, W.R. Street Address (P.O. Box Number is Not Acceptable) 1096 SUNSET STRIP SUNRISE FL 33313 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE Delete TITLE ☐ Change ☐ Addition NAME GEARY, WILLIAM W., JR. NAME 1096 SUNSET STRIP STREET ADDRESS STREET ADDRESS SUNRISE FL CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition NAME SCHIEBEL, KATHRYN S. NAME STREET ADDRESS 6171 W CENTURY BLVD STE 100 STREET ADDRESS CITY-ST-ZIP LOS ANGELES CA 90045 CITY-ST-ZIP TITLE EVD ☐ Delete TITLE ☐ Change \* ☐ Addition GRIFFITH, WR NAME NAME STREET ADDRESS 1096 SUNSET STRIP STREET ADDRESS CITY-ST-ZIP SUNRISE FL CITY-ST-ZIP AS TITLE ☐ Delete TITLE ☐ Change ☐ Addition GRIFFITH, BARBARA NAME NAME 1096 SUNSET STRIP STREET ADDRESS STREET ADDRESS SUNRISE FL CITY-ST-7IP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change Addition GEARY, WILLIAM W. JR. NAME NAME 1096 SUNSET STRIP STREET ADDRESS STREET ADDRESS SUNRISE FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

W.B. GRIFFI ME OF SIGNING OFFICER OR DIRECTOR 4/Ko/04

954 192 511 Daytime Phone #

FILED