

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 398268 (3)

1. Corporation Name

AMERICAN SUNSHINE DEVELOPMENT, INC



Principal Place of Business

2603 GUNN STREET
TALLAHASSEE FL 32304

Mailing Address

2603 GUNN STREET
TALLAHASSEE FL 32304

3. Date Incorporated or Qualified
03/28/1972

3a. Date of Last Report
11/21/1995

2. Principal Place of Business

21 2603 GUNN ST

Suite, Apt. #, etc.

2a. Mailing Address

26 2603 GUNN, ST.

Suite, Apt. #, etc.

4. FEI Number
NOT APPLICABLE

Applied For

Not Applicable

22 City & State

23 TALLAHASSEE FL.

Zip

24 32310

Country

25 LEON

27 City & State

28 TALLAHASSEE, FL.

Zip

29 32310

Country

30 LEON

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

TAYLOR, V.L.
2603 GUNN STREET
TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 VERNAL L. TAYLOR

Signature, typed or printed name of registered agent and treasurer (if applicable)

NOTE: Registered Agent signature required when resigning

Vernal L. Taylor (treasurer) 5/1/96

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME MOBLEY, JAMES O.
STREET ADDRESS 2408 JIM LEE ROAD
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE VP ☐ DELETE

NAME PITTMAN, WILLIAM JR
STREET ADDRESS 2605 POTTS DAMER ST.
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE T ☐ DELETE

NAME TAYLOR, V. L.
STREET ADDRESS 2603 GUNN STREET
CITY-ST-ZIP TALLAHASSEE FL 32304

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE: William Pittman Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/96

Date

487-3530

Daytime Phone #

CR2E034 (12/95)