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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # 425984

(2)

SUN REALTY, INC.

FILED

May 14 1997 8:00am

Secretary of State

Principal Place of Business 109 SE FLORESTA DRIVE PORT \$1. LUCIE FL 34963 US 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 25 9. Name and Address of Curren		Mailing Address 109 SE FLORESTA DRIVE PORT ST. LUCIE FL 34963-2236 US								
					3	Date Incorporated or Qualified 05/17/1973		ate of Last 10/1996		
	. ·					4. FEI Number 59-1474003		Applied For Not Applicable		
			Suite, Apt. #, etc.			Continuate of Status Desired	\$8.75 Additional			
		27							Required	
_	е	City & State			E	Election Campaign Financing Trust Fund Contribution	\Box		O May Be d to Fees	
Zip	— ´	Zip	Cour	ntry	8	This corporation has liability for		tax under		
24	9. Name and Address of Curre	29 Agent	[30]			Florida Statutes D. Name and Address of New Re		No Agent		
KING	3, GEORGE E			B1 Name			9.2			
109	SE FLORESTA DRIVE		}	B2 Street	Address	(P.O. Box Number is Not Acceptate	ole)			
POR	RT ST. LUCIE FL 34983									
			Ì	83						
				B4 City			FL	85 Zij	p Code	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida St	atutes, the ab	l_ ove-named	i corporati	on submits this statement for the p			j its registere	
office or i agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change w ations of, Section 607.0505	zas authorized 5, Florida Stati	by the cor ites.	rporation's	board of directors. I hereby acce	pt the app	ointment i	as registered	
SIGNATURE										
12.	Signature, typed or printed name of registered ag	en and trie if applicable ID DIRECTORS	(NOTE: Registered	Agent signaturi	e required wh	en reinstating) ADDITIONS/CHANGES TO OFFIC	DATE PERS ANI	D DIBECTO	ORS IN 12	
TITLE	OFFICENS AN	DELETE	11 117	 .F	T	ADDITIONS/OFFICE TO OFFICE	DEITO AIV	Change		
NAME	KING, IRIS		1.2 NA	M E				_ •		
STREET ADDRESS	109 SE FLORESTA DRIVE		1.3 \$10	EET ADDRESS						
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NAME			6.2 NA	MF						
STREET ADDRESS			6 3 ST	RET ADDRESS						
CITY-ST-ZIP			64 CI	Y-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 logal 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.

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