

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 466652 (5)
1. Corporation Name
SUNLIGHT ACRES, INC.

Principal Place of Business 10115 SE HWY 441 BELLEVUE FL 34420 US	Mailing Address 10115 SE HWY. 441 BELLEVUE FL 34420 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4680 S.E. 120th Street Suite, Apt. #, etc. 22 City & State 23 BELLEVUE, FL. 24 Zip 34420 25 Country MARION		2a. Mailing Address 26 4680 S.E. 120th St. Suite, Apt. #, etc. 27 City & State 28 BELLEVUE, FL. 29 Zip 34420 30 Country MARION		3. Date Incorporated or Qualified 12/27/1974	
4. FEI Number 59-1583584		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent HARRELL, DIANA S. 10115 S.E. HIGHWAY 441 BELLEVUE FL 34420		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 4680 S.E. 120th St. 84 City BELLEVUE, FL 85 Zip Code 34420	
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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 DIANA S. HARRELL
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 4-19-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KIRKLAND, J.G. 10115 SE HWY 441 BELLEVUE FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	J.G. KIRKLAND 4680 S.E. 120th St. BELLEVUE, FL. 34420
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST HARRELL, DONALD D. 10115 SE HWY 441 BELLEVUE FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	DONALD D. HARRELL 4680 S.E. 120th St. BELLEVUE FL. 34420
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HARRELL, DIANA S 10115 S.E. HIGHWAY 441 BELLEVUE FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	DIANA S. HARRELL 4680 S.E. 120th St. BELLEVUE, FL. 34420
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	

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 changed, or on an attachment with an address.

SIGNATURE: DIANA S. HARRELL - SECRETARY
4-19-98 352347-7714

CP2E034 (10/97)