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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 542695

SUNNY WHEELS, INC.

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90066 028 ***150.00



Principal Place of Business Mailing Address				i ikklidt ditte bebet eiden deten anne ander arbei dener bener anner				** ***** ***** 1891	
1209 DELAWARE AVENUE 1209 DELAWARE AVENUE									
FT. PIERCE FL	34950	FT. PIERCE FL 34950			ļ	DO NOT WRITE IN THIS SPACE			
US	US				3. Date Incorporated or Qualified				
						08/10/1977			1
Principal Place of Business 2a. Mailing Address						4. FEI Number	,	1	Applied For
21 1209 Delaware ave 26 P.O. Box 30			307			54-1076918			Not Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certifcate of Status Desired			Additional
22		27				n' remirate di orargi pessen		Fee	Required.
City & State	C D	City & State				6. Election Campaign Financing \$5.00 May Be			
23	Ft Pierce FL	verona, VA			Trust Fund Contribution			d to Fees	
Zip	Country	Zíp	Country	/		8. This corporation owes the curre	ent year Inta	ingible ∐Yes	DE No
24 3495		29 24482 30	l			Personal Property Tax.	onistered i		E NO
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name									
GORMAN, ROBERT J									
1209 DELAWARE AVENUE			82	Street	Addres	s (P.O. Box Number is Not Accepta	ible) ·		
FT. PIERCE FL 34950			83	t					
							-	1	
			84	City			FL	85 Zi	p 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									
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered A					required w	hen reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN	D DIREC	TORS IN 12
12.	PTD OFFICERS AND	DELETE	1.1 TITLE		500	retay .	TOERO AR	☐ Chang	
NAME	STEELE, BETTY J		1.2 NAME		Dat	riga S. Harris			_
STREET ADDRESS	P.O. BOX 307, N/A			TADDRESS	P. 6	7. Box 218			
ነ ነ	VERONA VA 24482		1.4 CITY-5			ona. VA 24482			
CITY-ST-ZIP TITLE			2.1 TITLE	71-ZII		asurer		Chang	e 🛂 Addition
NAME	STYER, ROBERT C		2.2 NAME		Bot	ty A. Humphreys			
STREET ADDRESS	P.O. BOX 307, N/A			TADORESS	Ri	Box 95-1			
CITY-ST-ZIP	VERONA VA 24482	· ·	2.4 CITY-			Defiance, VA 24	427		,
TITLE	SD	DELETE	31 TITLE	O, 21		ector, Vice Preside		Chang	e Addition
NAME	GORMAN, ROBERT J		3.2 NAME		Jun	ie S. Styer	4 11		
STREET ADDRESS	1209 DELEWARE AVE.			T ADDRESS	19	Trotter Mill Close			•
CITY-ST-ZIP	FT. PIERCE FL 34950		3.4. CITY-			pland VA 230	05		,
TITLE	11. TIENOE TE 34330	☐ DELETE	4.1 TITLE	U, L.	1.0,	$\frac{\pi \alpha_1 \circ \beta_1}{\alpha_2 \circ \beta_2} = \frac{\alpha_2 \circ \beta_2}{\alpha_2 \circ \beta_2}$. <u>,, , -</u>	☐ Chang	e Addition
NAME			4.2 NAME						
STREET ADDRESS				T ADDRESS	5	,			
CITY-ST-ZIP			4.4 CMY-5						
TITLE		☐ DELETE	5.1 TITLE		_			Chang	e Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS	;				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE					Chang	ge Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	T ADDRESS	3				}
					1				1

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, with all other like empowered. CITY-ST-ZIP

SIGNATURE: