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 # 543799 1. Corporation Name

SUNSTATES REALTY GROUP, INC.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90047 043 ***150.00



Principal Place of Business Mailing Address					(INDIE) BINT BIND BINT TO NO 10169 CAN	Billi nibit milit		J/8/1 8 B+	
4600 MARRIOTT DRIVE SUITE #200 4600 MARRIOTT DRIVE SUITE P. O. BOX 30043 P. O. BOX 30043 RALEIGH NC 27622 RALEIGH NC 27622					DO NOT WRITE IN	I THIS SPACE	<u> </u>		
					3. Date incorporated or Qualifed 08/24/1977				
Principal Place of Business 2a. Mailing Address					I ——		Applie	d For	
4600 Marriott-Drive - 26 P. 0. Box 300			<u> 30,43 </u>		<u>59-1766299</u>		Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State Raleigh, NC Raleigh, NC					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Countr		8. This corporation owes the current year Intangible				
24 27612	25 USA	29 27622 3	US,	4	Personal Property Tax.				
	9. Name and Address of Current	Registered Agent	— 	I Name	10. Name and Address of New Regis	tered Agent			
TUE	DDENTICE HALL CORDORATION	CVCTEM INC	8	Name					
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET				Street Add	Address (P.O. Box Number is Not Acceptable)				
SUITE 105				3					
TALLAHASSEE FL 32301			<u> </u>				71 · O · I		
			84	4 City		FL 85	Zip Cod	e	
Development 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: R	legistered Ag	ent signature requir		ATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE				
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Cha	ange	Addition	
NAME	LEONARD, RICHARD A.		1.2 NAME					}	
STREET ADDRESS	4600 MARRIOTT DR.		1.3 STRE	ET ADDRESS					
CITY-ST-ZIP	RALEIGH NC		1.4 CITY-	ST-ZIP				A 2.50-	
TITLE	TD	☐ DELETE	2.1 TITLE			☐ Cha	ange	Addition	
NAME	Kennedy, Glenn J.		2.2 NAME					ĺ	
STREET ADDRESS	4600 MARRIOTT DR.		2.3 STRE	ET ADDRESS		-		. {	
CITY-ST-ZIP	RALEIGH NC 2.40		2.4 CITY	ST-ZIP					
TITLE	S □ DELETE 3.1 TI		3.1 TITLE			☐ Cha	ange (Addition	
NAME	PAYNE, CLAIR K.		3.2 NAME	.					
STREET ADDRESS	4600 MARRIOTT DR.		3.3 STRE	ET ADDRESS					
CITY-ST-ZIP	RALEIGH NC		3.4. CITY-					Addition	
TITLE	D ·	☐ DELETE	4.1 TITLE	1		. □ Ch	anye	Addition	
NAME	MORTENSON, LEE N.		4. 2 NAM						
STREET ADDRESS			4.3 STRE	ET ADDRESS)	
CITY-ST-ZIP	CHICAGO IL		4.4 CITY-			· —		Addition	
TITLE	C	☐ DELETE	5.1 TITLE	,		□ Ch	ange		
NAME	SHAVER, DEAN F		5.2 NAME					- 1	
STREET ADDRESS	4600 MARRIOTT DR. STE 200			ET ADDRESS					
CITY-ST-ZIP	RALEIGH NC 27612		5.4 CITY- 6.1 TITLE			□ Ch.	2000	Addition	
TITLE .		☐ DELETE					o: iAc	Addition	
NAME			6.2 NAME	!				į	
STREET ADDRESS		,		ET ADDRESS					
CITY-ST-ZIP			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, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/99

(919) 781-5611

Daytime Phone #