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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 623499 (1)

SUNNY HILL FARMS, INC.

FILED Feb 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						-{	YARU AHAH AINI	
207 ATKINS RD GEORGETOWN FL 32139 US		P.O. BOX 327 GEORGETOWN FL 32139 US				DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified		
						05/30/1979		
2, Principal Pl	lace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number	Ar	plied For
21		26				59-2023624		t Applicable
Suite, Apt.	·	Suite, Apt. #, etc.				5, Certificate of Status Desired	\$8.75 / Fee Re	
City & State		City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees		
Zip	haran haran haran haran		Cou	ntry	S. The corporation bree of that paid the same year interigrate		_ ~	
24	25 29 30		30	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent		J No		
9 Name and Address of Current Registered Agent					Name	10. Name and Address of New Registered	tgent	
ATKINS, WYMAN 207 ATKINS ROAD							 -	
	ORGETOWN FL 32139			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
CONGETOTIN PL 32139				63				
								
				84	City	FL	85 Zip (Code
Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-hamed 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, typed or profess of profess agent and their agent agent and their agent								
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12
TITLE	P	DELETE	1.1 10	TLE			Change	☐ Addition
NAME	atkins, wyman B.		1.2 N/	AME				
STREET ADDRESS	207 ATKINS RD		1.3 ST	REET	ADDRESS			
CITY-ST-ZIP	GEORGETOWN FL		1.4 CITY-ST-ZIP		T - 21P			
TITLE	VS	☐ DELETE	2.1 TITLE		-		Change	Addition
NAME	ATKINS, ROSA L.		2.2 NAME					1
STREET ADDRESS	207 ATKINS RD		2.3 STREET ADDRESS					
CITY-ST-ZIP				2. 4 CITY - ST - ZIP			Channe	Addition
TIFLE	DULTE			3.1 TITLE 3.2 NAME			Change	Addition
CTREET ADDRESS					AUDOEGG			
STREET ADDRESS					ADDRESS T. 700			
CITY-ST-ZIP TITLE				TLE	ST-ZIP		Change	Addition
NAME			4.2 N		1			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			4.4 CI					
TITLE			5.1 TI				Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 \$1	REET	ADDRESS			
CITY-ST-ZIP			5.4 CI	TY-ST	T-ZIP			
TITLE		DELETE	6.1 71	LLE			Change	Addition
NAME			6.2 N/	ME				
STREET ADDRESS			6.3 \$1	REET	ADDRESS ·			
CITY-ST-ZIP			6.4 CI	TY-ST	T-21P			

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 supplientental 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 allachment with an address