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NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

755458

(7)

SUN DOME, INC.

A failing	A 4444444

4202 FOWLER AVE., ADM 250 C/O NOREEN SEGREST TAMPA FL 33620

Principal Place of Business

4202 FOWLER AVE., ADM, 250 C/O NOREEN SEGREST TAMPA FL 33620

FILED Feb 04 1998 8:00am Secretary of State



3. Date Incorporated or Qualified

12/09/1980

2a. Mailing Address 2a. Mailing Address 2b. Certificate of Status Desired Fee Regulred Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Country Suite, Apt. #, etc. Country Suite, Apt. #, etc. 6. Election Campaign Financing Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association? Yes No Country Suite, Apt. #, etc. City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No Country Suite, Apt. #, etc. Country Suite, Apt. #, etc. Country Suite, Apt. #, etc. City & State Trust Fund Contribution Added to Fees Tust Fund Contribution Added to Fees To Is this nonprofit corporation a homeowners association? Yes No Country Suite, Apt. #, etc. City & State City & State To Status Desired Fee Required Suite, Apt. #, etc. Country Suite, Apt. #, etc.	US		US			4. FEI Number	Applied For			
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Sulco, Apt. 4, etc. Sulco, Apt. 4, etc.	2. Principal P	Principal Place of Business 2a. Mailing Address				5 Certificate of Status Desired	\$8.75			
27	24		26			S. Certificate of States Desired	Fee Required			
City & State City & State City	Suite, Apt.	ite, Apt. #, etc. Suite, Apt. #, etc.				6. Election Campaign Financing	\$5.00 May Be			
Zip Country Zip	22	27				Trust Fund Contribution	Added to Fees			
Zip Country Zip Country 8. This corporation owes on has paid the current year intendible Personal Proporty Tax due June 30. Test No.	City & Stat	City & State City & State				7. Is this nonprofit corporation a homeowners	association?			
SEGREST, NOREEN 4202 FOWLER AVENUE ADM, 250 TAMPA FL 33820 11. Pursuant to the provisions of Sections 617 0500 and 617 1505. Portida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submits this statement for the pursose of charging its registered agent. I am familiar with, and accept the obligations of, Section 917 0503, Florida Statutes, the above-named corporation submit	23		28		☐ Yes ☑ No					
SEGREST, NOREEN 4202 FOWLER AVENUE ADM, 250 TAMPA FL 33620 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered distort or egistered agent, or both, in the State of Florida, Such change, the above-named corporation submits this statement for the purpose of changing its registered distort or egistered agent, or both, in the State of Florida, Such change, the above-named corporation submits this statement for the purpose of changing its registered distort or egistered 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 distort or egistered agent, and a registered agent a	Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the curre	ent year Intangible			
SEGREST, NOREEN 4202 FOWLER AVENUE ADM, 250 TAMPA FL 33620 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the registe	24	25	29	30		Personal Property Tax due June 30.	Yes No			
SEGREST, NOREEN 4202 FOWLER AVENUE ADM, 250 TAMPA FL 33620 11. Pursuant to the provisions of Sections 617 6502 and 617, 6508, Picricia Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered adjust of the purpose of changing its registered adjust. I am familiar with, and accept the obligations of, Section 17,0508, Picricia Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered adjust. I am familiar with, and accept the obligations of, Section 17,0508, Picricia Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered adjust. I am familiar with, and accept the obligations of, Section 17,0508, Picricia Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered adjusts of the purpose of changing its registered adjusts. I hereby accept the appointment as registered adjusts. I hereby accept the appointment as registered statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered adjusts. I hereby accept the appointme		Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered A	gent			
ADM_250 TAMPA FL 3820 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 617,0503, Plorida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILE C WALBOLT, DANIEL R. STREET ADDRESS TAMPA, PL 00000 11. TITLE VPD DELETE 11. TITLE VPD DELETE 11. TITLE VPD DELETE 21. TITLE 1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. LAGITY-ST-ZP TAMPA, PL 00000 1. Addition VPD DELETE 21. TITLE C STREET ADDRESS CT-37-2P TAMPA, PL 00000 1. Addition SEGREST, NOREEN 3. STREET ADDRESS CNT-57-2P TITLE D D DELETE 3. TITLE C Change Addition Additi	81 Name									
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TAMPA FL 33620 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the objection of 17.0502 florida. Statuties, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objection of 17.0502 florida Statutes. SIGNATURE 12.	:=:			Ì	83		,			
The Pursuant to the provisions of Sections 617 (ISO2 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, 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, 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, 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, or both, in the State of Change agent and the appointment as registered agent, or both, in the Statutes. INCEL 12.		=		1	<u> </u>					
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SIGNATURE Signature Type Signature S	11. Pursuant to the provisions of Sections 617,0502 and 617.1508, 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 but the composition's heart of directors. I hereby accent the appointment as registered									
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Signature, hyped or presed name of registroads, pack and stell eft gapicalase). (NOTE: Registered Agent alginiture required when reinstating): OATE	SIGNATURE									
TITLE	Ordin in Circ.	Signature, typed or printed name of registered age	ent and title if applicable. (NO	TE: Registered	Agent signatur					
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14. I hereby certify that the information supplied with this filling 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										
	14. I hereby o	14. I nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, 1 further certify that the information indicated on this annual report of suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an								

1-20-98

813-974-2131