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FILED

Jan 16 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 767178 (7)

1. Corporation Name

SUNSHINE GROUP HOME, INC.

Principal Place of Business

12875 SW 280TH STREET
13395 S.W. 268TH STREET
NARANJA FL 33032
US

Mailing Address

P.O. BOX 924800
13395 S.W. 268TH STREET
PRINCETON FL 33092-4800
US

3. Date Incorporated or Qualified

02/25/1983

3a. Date of Last Report

03/22/1996

2. Principal Place of Business

21

Suite, Apt #, etc.

City & State

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt #, etc.

City & State

Zip

Country

29

30

4. FEI Number

59-2273439

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☒

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOAS, DAVID C
11440 NORTH KENDALL DRIVE, SUITE 205
MIAMI FL 33176

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD
NAME JEFFREY, GLORIA HONORA
STREET ADDRESS 13395 S.W. 268TH STREET
CITY-ST-ZIP NARANJA FL☐ DELETETITLE VD
NAME JEFFREY, ELMO, JR.
STREET ADDRESS 27703 SOUTHWEST 132 COURT
CITY-ST-ZIP MIAMI FL☐ DELETETITLE VD
NAME CLAXTON, ELMER
STREET ADDRESS 98-07 NORTHERN BOULEVARD
CITY-ST-ZIP CORONA NY☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/97

(305) 258-4888

Date

Daytime Phone # 0026370

CR2E037 (9/96)