## 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 # F16523

(5)

SUNHAVEN HOMES INC.

	1	ILLE		)	
Mar	10	199	8	8:00am	
Sec	crei	tary	O	f State	



					B	
Principal Place of Business	Mailing Address					
C/O 5143 COMMERCIAL WAY	C/O 5143 COMMER					
SPRING HILL FL 34606	SPRING HILL FL 34606			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified		
				01/28/1981		
2. Principal Place of Business	2a. Mailing Address	<del></del>		4. FEI Number	Applied For	
21	26			59-2058585	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc	).			\$8.75 Additional	
22	27			5. Certificate of Status Desired	Fee Required	
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be	
23	28			Trust Fund Contribution	Added to Fees	
Zip Country	Zφ	Countr	У	8. This corporation owes or has paid the o		
24 25	29	30		Personal Property Tax due June 30.	Yes KNO	
9. Name and Address of Cui	rrent Registered Agent			10. Name and Address of New Registers	d Agent	
KIERZYNSKI, MICHAEL J.		81	l Name			
5143 COMMERCIAL WAY		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
SPRING HILL FL 34606		64	Street Auc	1855 (1.0. DOX NUMBER IS NOT ACCORDED TO		
Of third liber to didd		83	3	11. 11. 11. 11. 11. 11. 11. 11. 11. 11.		
		_			On John Code	
		84	4 City	F	L 85 Zip Code	
SIGNATURE Signature, typed or printed name of registeres			gent signature roqu	uired when reinstating) DATE		
12. OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	☐ DELET	E 1.1 TITLE		D/P/S/T	Change Addition	
NAME VENABLES, TREVOR J.		1.2 NAME		venables, trevor J.		
STREET ADDRESS 5143 COMMERCIAL WAY		1.3 STREI		5143 COMMERCIAL WAY		
CITY-ST-ZIP SPRING HILL FL		1.4 CITY-		SPRING HILL, FL 34606		
TITLE	☐ DETEI	E 2.1 TITLE			Change Addition	
NOVAE		2.2 NAME	ŧ			
STREET ADDRESS		2.3 STRE	ET ADDRESS			
CHTY-ST-ZIP		2. 4 CITY			The Addition	
TRLE	DELET	E 3.1 TITLE			Change Addition	
NAME		3.2 NAME	E			
STREET ADDRESS		3.3 STAE	ET ADDRESS			
CITY-\$1-2IP		3.4. CITY			A LEGIS	
TITLE	☐ DELET	IE 4.1 TITLE			Change Addition	
NAME		4. 2 NAM	IE .			
STREET ADDRESS		4.3 STRE	ET ADORESS			
CITY-ST-ZIP		4.4 CITY			Öberen (Taraster)	
THLE	DELE1	TE 5.1 TITLE	.		Change Addition	
NAME		5.2 NAM	E			
STREET ADDRESS		5.3 STRE	ET ADDRESS			
CITY-S1-ZIP		5.4 CITY				
TITLE	☐ DELET	TE 6.1 TITLE	:		☐ Change ☐ Addition	
NAME		6.2 NAM	E			
STREET ADORESS		63 STRE	ET ADDRESS			
CITY-S1-ZIP		64 CITY				
14. I hereby certify that the information supplied	ed with this filing does not qu	alify for the exem	nption stated i	in Section 119.07(3)(i), Florida Statutes. I further	r 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 all 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, out in an attackment with an address.

TREVOR J. VENABLES