FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Feb 16, 2001 8:00 am **DOCUMENT # F53013 Secretary of State** 1. Entity Name SUN PALMS, INC. 02-16-2001 90005 033 ***150.00 Principal Place of Business Mailing Address 171 WAKULLA LN VILLA E P.O. BOX 320035 920768 **UNIT 124** COCOA BCH FL 32932-0035 COCOA BCH FL 32931 2. Principal Place of Business 3. Mailing Address 170 FLAGHER Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE NILLACity & State 4. FEI Number Applied For 59-2418371 Cocoa Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 32931 Brevoud 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WRINKLE FULTON, BRENDA ess (P.O. Box Number is Not Acceptable) 171 WAKULLA LANE UNIT 124 COCOA BCH FL 32931 Keach 8. The above named entity strongly this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida WRINKLE SIGNATURE registered agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. President Director CR2E034 (10/00 Delete TITLE & Change **▶** Addition TITLE FULTON, BRENDA NAME NAME STREET ADDRESS TAME UILLA A. STREET ADDRESS 171 WAKULLA LN UNIT 124 CITY-ST-ZIP CITY-ST-ZIP COCOA BEACH FL 32931 ,ei 32931 Coron Beach ☐ Addition VICE President TITLE VPD ☐ Delete TITLE Director Change Change NAME NAME LIBERTY, MICHAEL Hichnel Liber 170 FLAGLER LAHE, UNIT 102 STREET ADDRESS STREET ADDRESS 215 WEST HASKELL CITY-ST-ZIP CITY-ST-ZIP 32931 Cocca Beach, Fl WEST ST PAUL MN 55118 TITLE Delete TITLE **Addition** Secretor NAME NAME CARIS, GLADYS STREET ADDRESS STREET ADDRESS 9400 OLD Cedar AVES 170 FLAGLER LN UNIT 101 CITY-ST-7IP CITY-ST-ZIP COCOA BCH FL 32931 BLOOMING TON, MN. Change ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

WRINKLE, President 2/3/01