2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004
Secretary of State

DOCUMENT# F70867

Entity Name: SUN RESORTS, INC.

Current Principal Place of Business:

3000 CLARCONA RD #99
APOPKA, FL 327038740

New Principal Place of Business:

Current Mailing Address:

155 SABAL PALM DRIVE
LONGWOOD, FL 327792558

New Mailing Address:

3000 CLARCONA RD #99
APOPKA, FL 327038740

FEI Number: 59-2170768 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAJTAR, STEVEN A
155 SABAL PALM DRIVE
LONGWOOD, FL 327792558 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DVPT ( ) Delete
Name: GRACE, PHILIP
Address: 155 SABAL PALM DR.
City-St-Zip: LONGWOOD, FL 32779

Title: VP ( ) Delete
Name: HEATH, TRACY
Address: 155 SABAL PALM DR.
City-St-Zip: LONGWOOD, FL 32779

Title: VPS (X) Delete
Name: HOLCOMB, ANDREA
Address: 1850 LEE RD #115
City-St-Zip: WINTER PARK, FL 32789

Title: P (X) Delete
Name: ADKINSON, LEE
Address: 3000 CLARCONA RD #99
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: ADKISON, LEE
Address: 3000 CLARCONA RD #99
City-St-Zip: APOPKA, FL 32703

Title: VPS (X) Change ( ) Addition
Name: ADKISON, REBECCA L
Address: 3000 CLARCONA RD #99
City-St-Zip: APOPKA, FL 32703

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE ADKISON P 01/15/2004

Electronic Signature of Signing Officer or Director — Date