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 # G41631

(4)

SUN TREE CONSTRUCTION, INC.

FILED Apr 22 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address		-{	0 8 0 8 0 0 0 0 10
·					
11137 PLANTATION RD. FT Myers FL 33912		11137 PLANTATION RD. FT MYERS FL 33912			
TI MILITOTE	OVALE	TT MIENO IL SOSIE		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
				06/01/1983	
	lace of Business	2a. Mailing Address	C 114 6 5	4. FEI Number	Applied For
21 656 Suite, Apt.	6 IDLENICD ST	26 6566 Dt Suite, Apt. #, etc.	ENILD ST	59-2294471	Not Applicable
22	#, BIC.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	A	City & State	······································	6. Election Campaign Financing	\$5.00 May Be
	NERS FL	28 FT MYERS	FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24 339	12 25 LEE	29 33912 3	o LEE	1 ' ' -	Yes No
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered	Agent
TAN	MINOSSIAN STEPHEN J.		81 Name		ŀ
2108 MONROE STREET B2			B2 Street Addre	t Address (P.O. Box Number is Not Acceptable)	
FORT MYERS FL 33901					
			83		
*			84 City		85 Zip Code
				<u>FL</u>	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.					
SIGNATURE					
12.	Signature, typed or pointed name of registered ager OFFICERS AND		Registered Agent signature require	ed when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PST OFFICERS AND	DELETE	1.1 TUTLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	DAVIDSON, RAYMOND M.		12 NAME		C cuango C reaction
STREET ADDRESS	6566 IDLEWILD STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL		14 City-St-ZiP		
TITLE	Ď	☐ DELETE	21 THTLE	-	Change Addition
NAME	DAVIDSON, RAYMOND M.	_	2.2 NAME		_ , _
STREET ADDRESS	6566 IDLEWILD STREET		2 3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL		2 4 CITY-ST-ZIP		
TITLE	1 71 111 110 1 6	DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADORESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE	-	☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		İ
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE1 ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			6.4 City - St - ZiP		
	certify that the information supplied wi	th this filing does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the information

4. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

uninger M Wavidson Poursons M Daniel Lanton

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