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Apr 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G64466

(7)

1. Corporation Name

SUN-LIVING DEVELOPING CO., INC.

Principal Place of Business

280 CORPORATE WAY
POST OFFICE DRAWER 'D'
ORANGE PARK FL 32073
US

Mailing Address

709 1/2 E ELK AVE
H
ELIZABETHTON TN 37643-2273
US



2. Principal Place of Business

21 15 Marco Vilas Drive

Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Marco Island FL

24 Zip

34146

Country

25 Collier

27 City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

10/11/1983

3a. Date of Last Report

05/01/1996

4. FEI Number

62-1172572

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 Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

HILL, LEO B.
280 CORPORATE WAY
H
ORANGE PARK FL 32073

10. Name and Address of New Registered Agent

81 Name
David H. Hampton, Sr.

82 Street Address (P.O. Box Number is Not Acceptable)
15 Marco Vilas Drive

83

84 City

Marco Island

FL

85 Zip Code

34146

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 *David H. Hampton, Sr.* David H Hampton, Sr.

4-4-97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☒ DELETE

NAME DP HAMPTON, DAVID H, SR

STREET ADDRESS 709 1/2 E ELK AVE

CITY- ST- ZIP ELIZABETHTON TN

1.2 TITLE ☐ DELETE

NAME P Joyce E Davis

STREET ADDRESS 709 1/2 East Elk Avenue

CITY- ST- ZIP Elizabethton TN 37643

1.3 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

1.4 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

1.5 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

1.6 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

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

SIGNATURE: *Joyce E Davis* Joyce E Davis 4-4-97 (423) 543-2578

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0477870

CR2E034 (9/96)