FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G91033

(2)

SUN COUNTRY BUILDERS, INC.

FILED
Apr 21 1997 8:00am
Secretary of State

1 U D 1 U U U	10101 11011 00100		l VIVIL BIYIL BIR11	010H 010H 1081

Principal Place of Business Mailing Address					1 1001/31 0016 10/01 1/01 00/10 1/10/1 1/1/1/	IFBII VIUN UN	UII DIUNI UHDI	il Dibit 1881	
221 FENTRESS BLVD. DAYTONA BEACH FL 32114 US		221 FENTRESS BLVD. DAYTONA BEACH FL : US	221 FENTRESS BLVD. DAYTONA BEACH FL 32114-1203						
00		00				3. Date Incorporated or Qualified 03/09/1984	1	le of Last 3/1996	Report
2. Principal P 21	lace of Business	2a. Mailing Address 26				4, FEI Number 59-2393416			applied For lot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & Stat	6	City & State				6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	<u> </u>	ıntry		8. This corporation has liability for i	tangible Yes	tax under	s. 199.032
24	25 g. Name and Address of Cur	29 29 29 29 29 29 29 29 29 29 29 29 29 2	[30]	· · ·		Florida Statutes 10. Name and Address of New Reg		·	
ech.	IWARZ, RALPH L., JR.	1		81	Name		,		
	RIVER BLUFF DRIVE			82	Ctroot Ad	dress (P.O. Box Number is Not Acceptab	lo)		
	OND BEACH FL 32174			62	Street Acc	aress (F.O. Box Number is Not Acceptate	iej		
*****				83					•
				84	City			85 Zir	Code
					· 	rporation submits this statement for the p	FL		
SIGNATURE	Signature typed or printed name of registered			d Age	nt signature req	Nirod when reinstating)	DATE	Olbroto	200.01.40
12.	PVT	AND DIRECTORS DELETE	13. 1.1 TO			ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	
NAME	SCHWARZ JR., RALPH L.	L otter	1.1 N					Change	L. Housian
STREET ADDRESS	314 RIVER BLUFF DRIVE				ADORESS				
CITY-ST-ZIP	ORMOND BEACH FL		1.4 C	ITY - S	1-7IP				
TITLE		DELETE	2.1 1	ITLE				☐ Change	Addition Addition
NAME			2.2 K						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE			ST - ZIP	*		Change	Additio
NAME			3.2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				HY-9	S1 - ZIP				
TITLE		☐ DELETE	1					☐ Change	Additio
NAME			4 2 1						
STREET ADDRESS				TREET STY-S	ADDRESS				
CITY-ST-ZIP TITLE		DELETE			1-217		·	Change	Additio
NAME			52 N					0-	
STREET ADDRESS			538	TREET	ADDRESS				
CITY-ST-ZIP				ITY-S	T - ZIP				
TITLE		☐ DELETE						Change	Additio
NAME			62 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	1			11Y-S		ed in Section 119.07(3)(i), Florida Statute	. 1.4		

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0/(3)(), Florida Statutes. 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.

CONATINES.