## 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 # H13430
SUNBIRD GENERAL CORPORATION

(4)

## FILED Feb 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address  C/O CHARLES T. YOUNG C/O CHARLES T. YOUNG 2780 OLD RIVER ROAD 2780 OLD RIVER ROAD  JACKSONVILLE FL 32223 JACKSONVILLE FL 32223			ND .	DO NOT WRITE IN TH	
		J. O.		3. Date Incorporated or Qualified 07/23/1984	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2535932	Not Applicable
Suite, Apt.	#, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registers	d Agent
	UNG, CHARLES T.		81 Name		
2780 OLD RIVER ROAD			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
JA	CKSONVILLE FL 32217		00		
			83		
			84 City	F	85 Zip Code
44 Duration	to the provisions of Sections 607.06	02 and 607 1609 Florida Sta	tutos the about period cor		
office or r	egistered agent, or both, in the Stat	e of Florida. Such change wa	as authorized by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the s	ppointment as registered
agent. La	m familiar with, and accept the obli	gations of, Section 607.0505,	Florida Statutes.		
SIGNATURE	Signature, typed or printed name of registered a	nert and tillo if applicable (f)	NOTE Registered Agent signature requ	uired when reinstaling) DATE	:
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	YOUNG, CHARLES T.		1.2 NAME		
STREET ADDRESS	2780 OLD RIVER RD.		1.3 STREET ADDRESS		•
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP		
TITLE	SD	DELETE	2.1 TITLE		Change Addition
NAME	YOUNG, JIMMIE M.		2.2 NAME		
STREET ADDRESS	2780 OLD RIVER RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2 4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
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-S1-ZIP		The original and the second	4.4 CITY-ST-ZIP		Change   Addition
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		C) DETEIL	6.1 TITLE		CHANGE MOUNDS
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP	5 - 140 07/0V) First Control 15 - 15	

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 suppliemental 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 of 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 or an attachment with an address.

SIGNATURE:

eng CHARLES.

2/11/98 (904) 2/2-9333