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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 29 1997 8:00am

Secretary of State

Change

Addition

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H24812

SUN SPORTSWEAR, INC.

Principal Place of Business

PO BOX 196

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

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Mailing Address PO BOX 196

YANKEETOWN FL 34498 US  2. Principal Place of Business		YANKEETOWN FL 34498-0196 US			3. Date Incorporated or Qualified 10/04/1984	<b>3a.</b> Date of Last Report <b>04/29/1996</b>					
<b>2.</b> Principa⊟ 	Place of Business	2a. Mailing Address				4. FEI Number		<b>-</b>		plied For	
211	6.4	26	<del></del>			59-2456070				t Applicable	
Suite, Apt 22	i. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			•	Additional quired	
City & Sta	ate	City & State				Election Campaign Financing     Trust Fund Contribution				May Be o Fees	
Zıp 24	Country 25	Zip 29	<del> </del>			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No					
	9. Name and Address of Cur-	rent Registered Agent				10. Name and Address of New Reg	jistered .	Agent			
MO	LEROY, E.G.		1	31	Name						
2 GENIE CT YANKEETOWN FL 34498		1	32	Street Addr	of Address (P.O. Box Number is Not Acceptable)						
TAI	NVECTOTHI LF 94490		ļa l	33			<del></del>				
				34	- Cit.			ar l	Zin (	Code.	
			['	34	City		FL	85	ZIP (	Code	
SIGNATURE	Signature Typed or printed name of registered	agent and title if applicable (f	NOTE: Registered	Agen	it signature requir	ed when roinstating)  ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	DIRE	CTOR	S IN 12	
TITLE	PST	DELETE	1177	F		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2.10.114	CI		Addition	
NAME	MCLEROY, E.G.		1.2 NAN		1						
STREET ADDRESS	1				ADDRESS						
City-St-ZIP	YANKEETOWN FL		1.4 CIT	 (-ST	- 719						
TIFLE	D	DELETE	2.1 TITL		<del></del>			□ c	hange	Addition	
NAME	MCLEROY, E.G.		2.2 NAA	AE.		į					
STREET ADDRESS			2.3 STR	EET A	address						
CITY-ST-ZIP	YANKEETOWN FL		2. 4 CIT	Y - S1	T-ZIP						
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NAME			3.2 NAM	AE.							
STREET ADDRESS	i		3.3 STR	EET A	ADDRESS						
CiTY-SI-ZIP			3.4. CIT	Y-\$1	T-ZIP						
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NAMê			4. 2 NA	ME							
STREET ADDRESS	•		4.3 STR	EET A	address		•				
CITY - S1 - ZIP			4.4 CfT		- ZIP			·			
TITLE		☐ DELETE	5.1 TITL	E					hange	Addition	
NAME			5.2 NAA	۸E							
STREET ADDRESS	; [		5.3 STR	EET #	ADDRESS						

5.4 CITY-ST-ZIP

63 STREET ADDRESS

64 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

6.1 TITLE

62 NAME

DELETE