

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

FILED

May 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # **N75898**
1. Corporation Name
SUN CENTRAL DEVELOPMENT & CONSTRUCTION, INC.

Principal Place of Business: **11011 GROVESHIRE CT, OLDEE, FL 34761 USA**
Mailing Address: **11011 GROVESHIRE CT, OLDEE, FL 34761 USA**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	8831 ELLIOTTS CT	26	8831 ELLIOTTS CT	9/13/1985	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2582136	
City & State		City & State		Applied For	
ORLANDO, FL		ORLANDO, FL		No: Applicable	
23	Zip	28	Zip	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
32836	Country	32836	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
USA		USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LOWERY, DEION R				LOWERY, DEION R			
11011 GROVESHIRE CT				11011 GROVESHIRE CT			
OLDEE, FL 34761				OLDEE, FL 34761			
B1 Name				B2 Street Address (P.O. Box Number is Not Acceptable)			
				8831 ELLIOTTS CT			
B3				B4 City			
				ORLANDO FL			
B5 Zip Code				32836			

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 _____ (Date) _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VD	<input type="checkbox"/> DELETE	1.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LOWERY, DEION R		1.2 NAME	LOWERY, DEION R			
STREET ADDRESS	11011 GROVESHIRE, CT		1.3 STREET ADDRESS	8831 ELLIOTTS CT			
CITY-ST-ZIP	OLDEE FL		1.4 CITY-ST-ZIP	ORLANDO, FL 32836	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	D	<input type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BAUDUIN, MICHAEL		2.2 NAME				
STREET ADDRESS	RT. 1 BOX 10		2.3 STREET ADDRESS				
CITY-ST-ZIP	MOUNT DORA, FL		2.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplement 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 executor, trustee, or partner 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: **Deion R Lowery** DEION R LOWERY V.P. 4/29/98 (407) 932-0770

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