

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90041 003 ***150.00

DOCUMENT # H90300

1. Corporation Name
SUNSTATES EQUITIES, INC.

Principal Place of Business

4600 MARRIOTT DR., #200
P.O. BOX 30043
RALEIGH NC 27622

Mailing Address

4600 MARRIOTT DR., #200
P.O. BOX 30043
RALEIGH NC 27622

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/16/1985

4. FEI Number

59-2617074

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 4600 Marriott Drive

2a. Mailing Address

26 P. O. Box 30043

Suite, Apt. #, etc.
22 Suite 120

Suite, Apt. #, etc.

City & State
23 Raleigh, NC

City & State
28 Raleigh, NC

Zip Country
24 27612 25 USA

Zip Country
29 27622 30 USA

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	MORTENSON, LEE N.	
STREET ADDRESS	55 E. MONROE STR	
CITY- ST- ZIP	CHICAGO IL	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	KENNEDY, GLENN J.	
STREET ADDRESS	4600 MARRIOTT DRIVE	
CITY- ST- ZIP	RALEIGH NC	
TITLE	EVP	<input type="checkbox"/> DELETE
NAME	LEONARD, RICHARD	
STREET ADDRESS	4600 MARRIOTT DRIVE	
CITY- ST- ZIP	RALEIGH NC	
TITLE	S	<input type="checkbox"/> DELETE
NAME	PAYNE, CLAIR K.	
STREET ADDRESS	4600 MARRIOTT DRIVE	
CITY- ST- ZIP	RALEIGH NC	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	ENGLE, CLYDE WM	
STREET ADDRESS	830 GREENBAY ROAD	
CITY- ST- ZIP	LAKE FOREST IL	
TITLE	C	<input type="checkbox"/> DELETE
NAME	SHAVER, DEAN F.	
STREET ADDRESS	4600 MARRIOTT DR., SUITE 200	
CITY- ST- ZIP	RALEIGH NC 27612	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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)(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, with all other like empowered.

SIGNATURE: *Richard G. Leonard Ex. V. President* 1/6/99 (919) 781-5611

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)