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May 02 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # J79802 (1)  
1. Corporation Name  
SUN STATE PROPERTIES, INC.



Principal Place of Business: 211 W. RIDGEWOOD CT. LONGWOOD FL 32779-0311  
Mailing Address: 211 W. RIDGEWOOD CT. LONGWOOD FL 32779-3311

3. Date Incorporated or Qualified: 06/22/1987  
3a. Date of Last Report: 05/01/1996  
4. FEI Number: 58-2849999  
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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21. 408 Havilland Court, DeBary, Florida 32713, USA  
2a. Mailing Address: 26. 408 Havilland Court, DeBary, Florida 32713, USA

9. Name and Address of Current Registered Agent: ROSS, ROBERT D., 211 W. RIDGEWOOD CT., LONGWOOD FL 32779

10. Name and Address of New Registered Agent: 81 Name: Shirley M. Ross, 82 Street Address: 408 Havilland Court, 84 City: DeBary, FL, 85 Zip Code: 32713

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: *Shirley M. Ross* Shirley M. Ross, President, April 14, 1997

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ROSS, ROBERT D.	
STREET ADDRESS	211 W. RIDGEWOOD CT.	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	DVT	<input type="checkbox"/> DELETE
NAME	ROSS, SHIRLEY M	
STREET ADDRESS	211 W RIDGEWOOD CT	
CITY - ST - ZIP	LONGWOOD FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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	P/T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Shirley M. Ross
2.3 STREET ADDRESS	408 Havilland Court
2.4 CITY - ST - ZIP	DeBary, Florida 32713
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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Shirley M. Ross* SHIRLEY M. ROSS, April 14, 1997 (407) 668-8588

CR2E034 (9/96)