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Jun 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # J 92323

1. Corporation Name

Principal Place of Business: Sunco Enterprises of

Mailing Address: 5201 Riverton Rd, JAX FL 32277

3. Date Incorporated or Qualified: 1988	3a. Date of Last Report
4. FEI Number: 59-2850058	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	2a. Mailing Address
21 5201 Riverton	26 Same
Suite, Apt. #, etc. 22 N/A	Suite, Apt. #, etc. 27 N/A
City & State 23 Jax FL	City & State 28 Jax FL
Zip 24 32277 / Country 25 Duval	Zip 29 32277 / Country 30 Duval

9. Name and Address of Current Registered Agent

Pamela J. Kemp
5201 Riverton Rd.
Jax. FL. 32277

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 Pamela J. Kemp — Pamela J. Kemp — 5-1-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Pamela J. Kemp	1.2 NAME	
STREET ADDRESS	5201 Riverton Rd	1.3 STREET ADDRESS	
CITY-ST-ZIP	Jax Fl 32277	1.4 CITY-ST-ZIP	
TITLE	Vice-President ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Paul A. Kemp	2.2 NAME	
STREET ADDRESS	7050 Greenholly	2.3 STREET ADDRESS	
CITY-ST-ZIP	Jax. FL. 32277	2.4 CITY-ST-ZIP	
TITLE	Secretary-Treas ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Mike Kemp	3.2 NAME	
STREET ADDRESS	8664 Rollingbrooke	3.3 STREET ADDRESS	
CITY-ST-ZIP	Jax FL 32256	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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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: Pamela J. Kemp President 5-1-97 904-744-7025
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #