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**PROFIT CORPORATION ANNUAL REPORT 1999**

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

**DOCUMENT # K03823**

1. Corporation Name

SUNSHINE NETWORK, INC.

Principal Place of Business

Mailing Address

7800 BELFORT PKY  
 270  
 JACKSONVILLE, FL 32256 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/19/87

2. Principal Place of Business  
 21 1500 Market St.

2a. Mailing Address  
 26 c/o T. Hurley, Comcast

4. FEI Number  
 65-0044370

Applied For  
 Not Applicable

22 Suite, Apt. #, etc.  
 34th Floor

27 Suite, Apt. #, etc.  
 1500 Market St., 34th

5. Certificate of Status Desired  \$8.75 Additional Fee Required

23 City & State  
 Philadelphia PA

28 City & State  
 Philadelphia PA

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

24 Zip Country  
 19102 USA

29 Zip Country  
 19102 USA

8. This corporation owes the current year Intangible Personal Property Tax  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Goodall, HW. "Buzz"  
 7800 Belfort Parkway, Ste. 270  
 Jacksonville, FL 32256 US

81 Name  
 Jim Liberatore  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 390 N. Orange Ave.  
 83 Suite 1075  
 84 City  
 Orlando FL 85 Zip Code  
 32801

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

*Thomas A. Hurley*

9/10/99

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  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 President & Director  
 Herbert Goodall  
 7800 Belfort Pky., Ste. 270  
 Jacksonville, FL 32256  DELETE

1.1 TITLE  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY - ST - ZIP  
 President & Director  
 Thomas A. Hurley  
 1500 Market Street, 34th Fl.  
 Philadelphia PA 19102  Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 Director  
 Lindsay Gardner  
 1400 Lake Hearn Drive NE  
 Atlanta GA  DELETE

2.1 TITLE  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY - ST - ZIP  
 Director  
 Jeffrey Abbas  
 5 West 3rd Street  
 Coudersport, PA 16915  Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 Vice President & Director  
 Richard Gunter  
 1655 State Rd. 472  
 Deland FL  DELETE

3.1 TITLE  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY - ST - ZIP  
 Director  
 Robert Shema  
 1500 Market Street, 34th Fl.  
 Philadelphia, PA 19102  Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 Vice President & Director  
 Fred Dressler  
 300 1st Stamford Pl.  
 Stamford CT  DELETE

4.1 TITLE  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY - ST - ZIP  
 800002967658  
 -08/24/99--01010--011  
 \*\*\*\*150.00 \*\*\*\*150.00  Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 Secretary  
 Herbert "Buzz" Goodall  
 7800 Belfort Pky., Ste. 270  
 Jacksonville, FL  DELETE

5.1 TITLE  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY - ST - ZIP  
*8/18/17*  Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 DELETE

6.1 TITLE  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY - ST - ZIP  
 Change  Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 checked, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Thomas A. Hurley*

9/11/99

(215) 981-7548

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/798)



August 11, 1999

Sean Toner  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314



Re: Sunshine Network, Inc. - K03823

Dear Mr. Toner:

Enclosed please find the annual report for Sunshine Network, Inc. The address on the annual report was incorrect and was not received by Sunshine Network, Inc. I obtained the previous annual report from the State of Florida database. Following instructions from your customer service department I duplicated the report and have made all corrections and have enclosed our check for One Hundred Fifty Dollars (\$150.00).

If you have any questions or should require further information please contact me at 215-981-7580.

Sincerely,

A handwritten signature in black ink that reads "Robert E. Shema". The signature is written in a cursive style with a long horizontal line extending to the right.

Robert Shema  
Director