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

FILED Feb 16 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (0)K04699 SUN LAND COMPANY OF HOBE SOUND, INC. Principal Place of Business Mailing Address 4500 PGA BLVD STE 400 PALM BEACH GARDENS FL 33418 4500 PGA BLVD STE 400 PALM BEACH GARDENS FL 33418 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/02/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0023014 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 Cily & Stato City & State 6, Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Ζıρ Country 8. This corporation owes or has paid the current year Intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DIVOSTA, OTTO B. 4500 PGA BLVD STE 400 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33418 **B**3 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. DELETE Addition Change TITLE 1.1 TITLE DIVOSTA, OTTO B. NAME 1.2 NAME 4500 PGA BLVD #400 STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GDNS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME DIVOSTA, BETTY J. 2.2 NAME 4500 PGA BLVD #400 STREET ADDRESS 2.3 STREET ADDRESS PALM BEACH GDNS FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE OWEN, JACK B. J NAME 3.2 NAME 4500 PGA BLVD., SUITE 400 STREET ADDRESS 3 3 STREET ADDRESS PALM BEACH GARDENS FL CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE 4.1 TITLE Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-7IP CRTY-ST-7IP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 eath; that I am an officer or director of the officeriver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Flock 13 if changed by our an attachment with an address

5.4 CITY - ST - ZIP

6.4 CITY-ST-ZIP

6.1 TALE

62 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

CITY - ST - ZIP TITLE

STREET ADORESS

CITY - ST- 7IP

NAME

Otto B. DiVosta as Pres. 2/5/98 (561) 627-2112

Change

Addition