FILI	E NOW:	FILING	FEE	AFTER	MAY	1	IS	\$225.	.00
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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

\Box	OCUMENT	#
1.	Corporation Name	

K05711

(2)

SUMERUN PROPERTIES, INC.

Principal Place of Business	Mailing Ac
3603 CLARK RD. SARASOTA FL 34233	POST SARAS
US	US

mailed 4.15.96

001111	THEM I HO! LITTLO; 1140.				
Principal Place	of Business	Mailing Address			
3603 CLAR SARASOTA US		POST OFFICE 19465 SARASOTA FL 34276 US			
•				3. Date incorporated or Qualified	3a. Date of Last Report
	ace of Business	2a. Mailing Address		12/03/1987 4. FEI Number	04/26/1995 Applied For
₂₁ 510	0 87th St. E.	₂₆ 5100 87th	St. E.	59-2901892	Not Applicable
Suite, Apt. a	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State	73	6. Election Campaign Financing	\$5.00 May Be
Zip Brac	denton, Fl.	28 Bradenton	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to Fees
24 342	02 ₂₅ UŚA		o ÜSA	Florida Statutes Yes	
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
HOGAI	N, PATRICK		82 Street Ade	dress (P.O. Box Number is Not Acceptable)
	CLARK RD.			dress (P.O. Box Number is Not Acceptable 100 87th St.E.	
SARAS	OTA FL 34233		83 B	radenton, Fl. 3420	2
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes, I	he above named corpo	oration submits this statement for the purp	one of phanning its registered office
or registeri	ed agent, or both, in the State of Flo th, and accept the obligations of, Sec	rida. Such change was authorized t	by the corporation's bo	ard of directors. I hereby accept the appoin	ntment as registered agent. I am
SIGNATURE _					
12.	Signature, typed or printed name of registered age	int and title if applicable (NOTE: F ND DIRECTORS	Registered Agent signature requi	······································	DATE
TITLE	D	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	HUNT, ROBERT A.		1.2 NAME		E risinge D receiper
STREET ADDRESS	3603 CLARK ROAD		1.3 STREET ADDRESS	5100 87th St.E.	
CHTY-ST-ZIP	SARASOTA FL		1.4 CITY - \$1 - ZIP	Bradenton, Fl. 34	4202
TITLE	VP	☐ DELETE	2. 1 TITLE	2244	Change Addition
NAME	HOGAN, PATRICK		2.2 NAME		
STREET ADDRESS	3603 CLARK ROAD		2.3 STREET ADDRESS	5100 87th St. E.	
CITY-ST-7IP	SARASOTA FL		2.4 CITY - ST - ZIP	Bradenton, Fl. 34	1202
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CITY-ST-ZIP		[7] DEL E14	3.4 CHTY-S1-ZIP		
TITLE NAME		☐ DELETE	4 1 THLE		Change Addition
STREET ADDRESS			4.2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		☐ DELETE	4.4 C/TY - ST - Z/P 5. 1 TITLE		Change Addition
NAME		<u> </u>	5.2 NAME		C committee C volumni
STREET ADDRESS			5.3 STREET ADDRESS		
CHTY-ST-ZIP			5.4 City - St - ZiP		
THLE		☐ D€LĒ1E	6 1 THLE		Change Addition
NAME			6.2 NAME		_ , _ ,
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, ozen an attachment with an address.

SIGNATURE:

| Comparison of the corporation of the corporation of 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, ozen an attachment with an address.

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