

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K99667**

1. Corporation Name

SUNSHINE BUILDERS, INC.

Principal Place of Business

Mailing Address

**7212 41st AVE. EAST
BRADENTON, FL
34208**

3. Date Incorporated or Qualified 6-30-89	3a. Date of Last Report 1995
4. FET Number 65-0138178	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**SUSAN M. KOLZE
7212 41 AVE EAST
BRADENTON, FL 34208**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	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: _____ (NOTE: Registered Agent Signature required when not stated) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D/PRES	<input type="checkbox"/> DELETE
NAME	SUSAN M. KOLZE	
STREET ADDRESS	7212 41 AVE E	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	D/VP	<input type="checkbox"/> DELETE
NAME	ALOIS A. SEDLAK	
STREET ADDRESS	5005 CANTERBURY DR	
CITY-ST-ZIP	MINNESOTA, FL 34243	
TITLE	D/SECY/TASAS	<input type="checkbox"/> DELETE
NAME	RALPH M KOLZE	
STREET ADDRESS	7212 41 AVE E.	
CITY-ST-ZIP	BRADENTON, FL 34208	
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. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	

400001748604

03/19/96 - 01028-028

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 199.07(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate. 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: Susan M. Kolze **SUSAN M. KOLZE** **3-14-96** **(941) 747-8901**

CR2E034 (12/95)