


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

FILED

Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L03112** (4)
1. Corporation Name
SUN STATE ELECTRONICS, INC.

Principal Place of Business 680 E. STATE RD. 434 WINTER SPRINGS FL 32708	Mailing Address P.O. BOX 195475 WINTER SPRINGS FL 32719-5475 US
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2. Principal Place of Business 680 E. STATE RD 434 WINTER SPRINGS FL 32708		2a. Mailing Address P.O. BOX 195475 WINTER SPRINGS FL 32719-5475 US		3. Date Incorporated or Qualified 07/19/1989	3a. Date of Last Report 05/01/1996
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 59-2964838	Applied For <input type="checkbox"/> Not Applicable
22. City & State WINTER SPRINGS FL		27. City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip 32708		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country		29. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GREENE, FRANCINE MARIE 1112 PHEASANT CIRCLE WINTER SPRINGS FL 32708				10. Name and Address of New Registered Agent	
81. Name					
82. Street Address (P.O. Box Number is Not Acceptable)					
83.					
84. City				85. Zip Code FL	

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's signature required when reissuing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENE, FRANCINE MARIE	1.2 NAME	
STREET ADDRESS	1112 PHEASANT CIRCLE	1.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER SPGS FL 32708	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENE, DONALD ARTHUR	2.2 NAME	
STREET ADDRESS	1112 PHEASANT CIRCLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER SPGS FL 32708	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLS, MICHAEL J	3.2 NAME	
STREET ADDRESS	817 MADRIGAL COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32825	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STORKE, MARY	4.2 NAME	
STREET ADDRESS	25 GENTLE BEN PATH	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BCH FL 32174	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *[Signature]* 407-327-1000
4/20/97

CR2E034 (9/96)