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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # L60712

Corporation Name

SUNSET PRINTING OF NAPLES, INC.

SIGNATURE:

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90136 030 \*\*\*150.00



Principal Place of Business Mailing Address										
DONALD K. ROSS, JR.										
121 DAVIS BU		2321 DAVIS BLVD.				DO NOT WRITE IN THIS SPACE				
APLES FL 33962 NAPLES FL 33962						3. Date Incorporated or Qualifed				
						03/13/1990	o or godines			
. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		-	TIA	pplied For
]	Same	26 Same				65-0176611			<b>├</b> ─- <b>├</b> ─-	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.							\$8.75	Additional
12217		27 2217-A And	chai	rage	LN	5. Certifcate of Sta	tus Desired		Fee R	equired
City & Sta		City & State	-			6. Election Campai	gn Financing	<u> </u>	\$5.00	May Be
Naples F1 28 Naples						Trust Fund Cont	ribution	<u> </u>	Added	to Fees
Zip	Country	Žip	Cou			8. This corporation	owes the currer	nt year int		
34/	09 25 USA		0	ust	} 	Personal Proper		<del></del>	☐ Yes	□No
	9. Name and Address of Current F	Registered Agent		94		10. Name and Add	ess of New Re	gistered	Agent	
png	S DONALD K IB			81 Na	ne			4		
ROSS, DONALD K., JR. 2640 GOLDEN GATE PARKWAY				82 Str	et Addre	ess (P.O. Box Number	s Not Acceptab	ile)		
	E 315			-				<del></del>		<del></del>
NAPLES FL 33942				83						
MAG	LEG 1 E 33942			84 City				P= 1	85 Zip	Code
					<del></del> -	<del></del>		FL		
<ol> <li>Pursuant</li> </ol>	to the provisions of Sections 607.0502 a registered agent, or both, in the State of	ind 607.1508, Florida Statutes	, the a	ove-nam	ed corpo sporation	eration submits this stat o's board of directors. I	ement for the p hereby accept	urpose of the appoi	changing its ntment as r	s registered egistered
agent, I a	im familiar with, and accept the obligation	ns of, Section 607.0505, Florid	la Stati	ites.			,			-
IGNATURE								<del></del>		
	Signature, typed or printed name of registered agent an			Agent signat	Deniupen en	when reinstating) ADDITIONS/CHA	VOCES TO OFFI	DATE OF AN	n Dipect	200 (N. 12
2. TLE	OFFICERS AND	DIRECTORS DELETE	13.	16	$\square$	ADDITIONS/CHA	NGES TO OFFI	CENS AN	Change	[ Addition
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14. I 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, with all the empowered.

6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

1/19/99 (941) 775-3553