

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

**FILED**  
**Mar 27 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION  
 ANNUAL REPORT  
 1997



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

**DOCUMENT # L71933 (0)**

1. Corporation Name  
**SUNSETS POINT INVESTMENTS, INC.**



Principal Place of Business Mailing Address  
**R. MOORE CONSTRUCTION**  
**BOX 366**  
**LINDSAY ON K9W45 K9V453**  
**CN**  
**BOX 366**  
**LINDSAY ON K9W45 K9V453.**  
**CN**

3. Date Incorporated or Qualified **05/08/1990** 3a. Date of Last Report **03/26/1996**  
 4. FEI Number **59-3013993** Applied For Not Applicable  
 5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

21. Principal Place of Business: 21a. Mailing Address  
 22. Suite, Apt. #, etc. 22a. Suite, Apt. #, etc.  
 23. City & State 23a. City & State  
 24. Zip Country 24a. Zip Country  
**K9V 453** **CN** **K9V 453** **CN**

9. Name and Address of Current Registered Agent  
**BROWN, RICHARD H.**  
**300 BAY PLAZA**  
**TREASURE ISLAND 33706**

10. Name and Address of New Registered Agent  
 81. Name  
 82. Street Address (P.O. Box Number is Not Acceptable)  
 83.  
 84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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 this filing.) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
 NAME: **MOORE, RICHARD H.**  
 STREET ADDRESS: **RR6 PLEASANT PT.**  
 CITY-STATE-ZIP: **LINDSEY ONTARIO ST**  
 NAME: **MOORE, SANDRA L.**  
 STREET ADDRESS: **RR6 PLEASANT PT.**  
 CITY-STATE-ZIP: **LINSEY ONTARIO**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 1.1 TITLE  Change  Addition  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY-STATE-ZIP  
 2.1 TITLE  Change  Addition  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-STATE-ZIP  
 3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-STATE-ZIP  
 4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-STATE-ZIP  
 5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-STATE-ZIP  
 6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-STATE-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]* **RICHARD E. MOORE** MARCH 20/97 705/328-2992

CR2E034 (9/96)