

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N17164**

(7)

1. Corporation Name

SUNSHINE DISTRICT, INC.



Principal Place of Business

Mailing Address

**6210 BROOKHILL CIR
ORLANDO FL 32810**

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ORLANDO FL 32810**

3. Date Incorporated or Qualified
10/07/1986

3a. Date of Last Report
07/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2782829

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24

25

Country

29

Zip

30

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DIETZ, ROBERT
1879 BRISTOL CT.
MAITLAND FL 32751**

81 Name

Janice Taylor

82 Street Address (P.O. Box Number is Not Acceptable)

1220 Palmetto Rd.

83

Eustis, Fl. 32726

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 I accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Janice Taylor, Secretary

(NOTE: Registered Agent signature required when reinstating)

DATE

3-5-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P**
STREET ADDRESS **TAYLOR, JANICE**
CITY - ST - ZIP **1220 PALMETTO ROAD
EUSTIS FL 32726**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **T**
STREET ADDRESS **CARVER, DIANNE**
CITY - ST - ZIP **1471 CLAY BLVD.
EUSTIS FL 32726**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **GOODWIN, DEBBIE**
CITY - ST - ZIP **500 FERN AVE.
TAVARES FL 32778**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **KURTZ, RUTHE**
CITY - ST - ZIP **1310 ALTALOMA AVE.
ORLANDO FL 32803-2713**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **CLIBURN, RAY**
CITY - ST - ZIP **514 E LANGFORD DR.
PLANT CITY FL 33566**

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **D**
5.3 STREET ADDRESS **Anne Meter**
5.4 CITY - ST - ZIP **5526 6th St.
Zephyrhills, Fl. 33541-3910**

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **RAJEKIN, GENE**
CITY - ST - ZIP **445 PALMDALE RD.
OLDSMAR FL 34677**

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME **D**
6.3 STREET ADDRESS **Fred Novo-Mesky**
6.4 CITY - ST - ZIP **1641 N. Patlin Circle
Largo, Fl. 34640**

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

Janice Taylor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Time Phone #

3-5-96 352-728-1737

CR2E037 (12/95)