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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N39819 (0)

1. Corporation Name

SUNBEAM CENTER COMMERCIAL PARK ASSOCIATION, INC.



Principal Place of Business

Mailing Address

11221-1 ST. JOHNS IND PKWY  
JACKSONVILLE FL 32216  
US

11221-1 ST. JOHNS IND PKWY S  
JACKSONVILLE FL 32216  
US

3. Date Incorporated or Qualified  
09/07/1990

3a. Date of Last Report  
08/10/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMB, EDWARD  
11221-1 ST. JOHNS IND. PKWY S  
JACKSONVILLE FL 32216

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 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 accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME LAMB, EDWARD  
STREET ADDRESS 11221-1 ST. JOHNS IND PKWY S  
CITY-ST-ZIP JACKSONVILLE FL

TITLE VSD ☐ DELETE

NAME CASWEL, TOMMY  
STREET ADDRESS 9595 SUNBEAM CENTER DRIVE  
CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☐ DELETE

NAME BERGHOEFFER, JOYCE  
STREET ADDRESS 9601 SUNBEAM CENTER DRIVE  
CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☒ DELETE

NAME DUBBERLY, VERNON  
STREET ADDRESS 9612 SUNBEAM CENTER DRIVE  
CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☐ DELETE

NAME HARRIS, DAVE  
STREET ADDRESS 9624 SUNBEAM CENTER DRIVE  
CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☐ DELETE

NAME MOONEYHAN, MARK  
STREET ADDRESS 1121 POLOLEE ROAD  
CITY-ST-ZIP JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME D  
1.3 STREET ADDRESS BERNARD I. Licht  
1.4 CITY-ST-ZIP 9612 Sunbeam Center Drive  
JACKSONVILLE, FL 32257

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME D  
2.3 STREET ADDRESS STEVE MATSON  
2.4 CITY-ST-ZIP 9654 SUNBEAM CENTER DRIVE  
JACKSONVILLE, FL 32257

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 if changed, or on an attachment with an address.

SIGNATURE: *Edward Lamb* Edward Lamb

4/25/96

928-1101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)