DOCUMENT # N98000004576

1. Entity Name

SUNRA, INC.

AMENDMENT

FILED

00 AUG -4 AM 7:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1781 PARK CENTER DRIVE FL 32835	1781 PARK CENTER DRIVE ORLANDO FL 32835-6210

2. Principal Place of Business	3. Mailing Address
6177 Lake Ellenor Dr. Suite, Apt. #, etc.	6177 Lake Ellenor Dr. Suite, Apt. #, etc.
Orlando, FL	Orlando, FL
Zip: 32809 Country: US	Zip: 32809 Country: US

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to: Department of State

OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
DP MILLER, L. STEVEN 1781 PARK CENTER DRIVE ORLANDO FL 32835	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D T. Lincoln Morison 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
DS BELL, THOMAS A 1781 PARK CENTER DRIVE ORLANDO FL 32835	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D Charles C. Frey 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
DT GOODMAN, RICHARD 1781 PARK CENTER DRIVE ORLANDO FL 32835	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Stephen M. Richmond 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Keith J. Brown 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Thomas J. Gispanski 6177 Lake Ellenor Dr. Orlando, FL 32809 ☐ Change ☒ Addition
	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen M. Richmond (407)532-1350

FOR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (9/99)