

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 12, 2001 8:00 am
Secretary of State

02-12-2001 90209 050 ***158.75

DOCUMENT # P00000007685

1. Entity Name

SUNRISE PARTNERS, INC.

Principal Place of Business

**251 PLAZA DRIVE
OVIEDO FL 32765**

Mailing Address

**251 PLAZA DRIVE
OVIEDO FL 32765**

2. Principal Place of Business

606 CASA PARK COURT C
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 195547
Suite, Apt. #, etc.

813651



DO NOT WRITE IN THIS SPACE

City & State

WINTER SPRINGS, FL

City & State

WINTER SPRINGS, FL

4. FEI Number

59-3629348

Applied For

☒ Not Applicable

Zip

Country

32708-5415 USA

Zip

Country

32719-5547 USA

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HARBISON, PEGGY B
312 WHITE OAK DRIVE
ALTAMONTE SPRINGS FL 32701**

Name

PEGGY B. HARBISON

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

606 CASA PARK COURT C

City

WINTER SPRINGS,

FL

Zip Code
32708

7. Name and Address of New Registered Agent

8. 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

Peggy B. Harbison **PEGGY B. HARBISON, PRESIDENT** DATE **2/6/2001**

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT PEGGY B. HARBISON 606 CASA PARK COURT C WINTER SPRINGS, FL 32708 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT JAMES F. GRIDER 251 PLAZA DRIVE OVIEDO, FL 32765 <input checked="" type="checkbox"/> Delete DECEASED 5/10/00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC/TREAS. PEGGY B. HARBISON 606 CASA PARK COURT C WINTER SPRINGS, FL 32708 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peggy B. Harbison **PEGGY B. HARBISON**

DATE **2/6/2001**

Daytime Phone #

Daytime Phone #

CR2E034 (10/00)