2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 19, 2007 08:00 All Secretary of State DOCUMENT # P00000082170 1. Entity Name SUNSET PROPERTIES GENERAL, INC. Principal Place of Business Mailing Address 270 GREENWOOD DRIVE BOX 490276 KEY BISCAYNE FL 33149 **KEY BISCAYNE FL 33149** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & Stato 4. FEI Number Applied For 65-1037379 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo TELLAM, HENRY S JR Street Address (P.O. Box Number is Not Acceptable) 270 GREENWOOD DRIVE **KEY BISCAYNE FL 33149** City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TOTE Defete THE Change ☐ Add₁lion WEBB, ELMER E NAME U00000640359 NAME 35526 ESTES RD 02/28/07-80063-004 150.00 STREET ADDRESS STREET ADDRESS EUSTIS FL 32736 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete HIEF Change ■ Addition TELLAM, HENRY D JR NAM NAME 270 GREENWOOD DRIVE STRUT ADDRESS STREET ADDRESS KEY BISCAYNE FL 33149 CITY-ST-ZIP CITY-S1-7IP TITLE Delete -THUE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE Delete TIRE Change ☐ Addition NAME. NAME STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY - ST- 7IP 11111 ☐ Delcie THILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CHY-SI-7IP Tittle Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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 logal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

305-361-5319