

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 90497 031 \*\*\*150.00

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**DOCUMENT # P01000087481**



1. Entity Name  
**SUNBURST HOLDINGS OF HERNANDO INC.**

Principal Place of Business  
**5421 COMMERCIAL WAY  
SPRING HILL FL 34606**

Mailing Address  
**5421 COMMERCIAL WAY  
SPRING HILL FL 34606**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1136221**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BYLSMA, WIM JAN  
10117 SUNBURST CT.  
SPRING HILL FL 34608**

Name

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

City

**FL**

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**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DPST	BYLSMA, WIM JAN	10117 SUNBURST CT.	SPRING HILL FL 34608	<input type="checkbox"/>
DST	TIBLIS, RUDOLPH L	5421 COMMERCIAL WAY	SPRING HILL FL 34606	<input checked="" type="checkbox"/>
VD	KIBBIE, CHARLES J	5421 COMMERCIAL WAY	SPRING HILL FL 34606	<input checked="" type="checkbox"/>
VD	Bylsma, Lucie	10117 Sunburst Court	Spring Hill FL 34608	<input type="checkbox"/>
V	Bylsma, Diana	10117 Sunburst Court	Spring Hill FL 34606	<input type="checkbox"/>

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Wim Jan Bylsma*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/14/03

Daytime Phone #

(352) 596-4141

CR2E034 (10/02)