## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

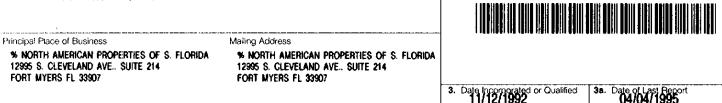
DIVISION OF CORPORATIONS

1996

P92000004031 (0)

DOCUMENT #

SUNTREE SQUARE, INC.



								,,	1	.,,	
	Principal Pla	ace of Busine	988	2a. Mailing Address				4. FEI Number 65-0373493			Applied For Not Applicable
21	C. 3a Ant 1			26					····	<u> </u>	L
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required	
	City & State	1		City & State				6. Election Campaign Financing		\$5.0	00 May Be
23				28				Trust Fund Contribution			ed to Fees
	Zip		Country	Zip	C	Country		8. This corporation has liability for	intangible ta	x under s	199.032,
24			25	29	30			Florida Statutes	🔀 No		
		9. Name	and Address of Current	Registered Agent				10. Name and Address of New I	Registered a	Agent	
	HAFELE, DALE G										
% NORTH AMERICAN PROPERTIES OF S. FLORIDA						82	82 Street Address (P.Ö. Box Number is Not Acceptable)				
12995 S. CLEVELAND AVE., SUITE 214 FORT MYERS FL 33907											
	10111 111	1211012				84	City		FL	85 2	ip Code
	or registere familiar wit	ed agent, or	ons of Sections 607,0502 a both, in the State of Florida of the obligations of, Section	<ul> <li>Such change was</li> </ul>	authorized by th	above-r ne corp	named corpo oration's boa	oration submits this statement for the pu and of directors. I hereby accept the app	rpose of cha ointment as	nging its registere	registered office d agent. I am
SIG	NATURE	Signature typed	or printed name of registered agent a		(NOTE: Registe	ered Agen	it signature requir	red when reinstating!	DATE		
12.		Pn	OFFICERS AND			3.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECT	ORS IN 12
1111	F		IO THOMAS I	☐ DÉI	.ETE 1.	1 TITLE				] Change	Addition
NAM	1E		AS, THOMAS L		1.	2 NAME					
STRE	eet address		3RD ST., SUITE 300		1.	3 STREET	ADDRESS				
CHTY	/-ST-ZIP		nati oh		1.	4 CITY - S	T-ZIP				
TITL	F	SD		DEI	ETE 2	1 TITLE				☐ Change	Addition
NAM	15		AS, WILLIAM J JR.		2.	2 NAME					
STRE	EET ADDRES\$		3RD ST., SUITE 300		2.	3 STREET	ADDRESS				
	r-St- <b>Z</b> IP	CINCIN	nati oh			4 CITY - S					
1171		VD		☐ DEI		1 TITLE	. 20		Г	Change	☐ Addition
NAV		GROTE	, RICHARD W			2 NAME					
	EET ADDRESS	5240 LE	STER RD., #200			-	ADDRESS				
			NATI OH								
TITL	r-ST-ZIP	VO		DEL		4 CITY - S 1 TITLE	1-ZIP		г	Change	Addition
NAM		HAFELE	, DALE G		2	2 NAME			L	□ Auguitic	□ Addition
			S. CLEVELAND AVE., #	214							
	EET ADDRESS	FT MYE					ADDRESS				
	r - ST - ZIP			☐ DEL		4 CITY - S	I-ZIP			Chance	Addition
THIL				DE:		1 TITLE			L	] Change	Addition
NAM	_	,				2 NAME					
5186	EET ADDRESS				5.	3 STREET	ADDRESS				
CITY	-ST-ZIP					4 CITY - S	1-ZIP				
TITL	E			☐ DEI	ETE 6.	1 TITLE				] Change	Addition
NAM	ME.				6.	2 NAME					
STR!	EET ADDRESS				6.	3 STREET	ADDRESS				

64 CITY-S1-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 certify that I am an officer or directory 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 13 if changed, group of attachment with an address.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/91 941-276-1121 Date Daytine Projet