FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 8:20
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P92000005797 (5)

1. Corporation Name
SUN HOMES OF THE PALM BEACHES, INC.

Principal Place of Business
1419 LANDS END RD
MANALAPAN FL 33462

Mailing Address
1419 LANDS END RD
MANALAPAN FL 33462

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/18/1992
3a. Date of Last Report: 04/12/1994
4. FEI Number: 65-0365339 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
CAPITAL CONNECTION, INC.
417 E VIRGINIA ST
SUITE 1
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	DE-POLI, CAROLINE
STREET ADDRESS	1419 LANDS END RD
CITY-ST-ZIP	LANTANA FL 33462
TITLE	D
NAME	HANHIROVA, ERIC
STREET ADDRESS	1419 LANDS END RD
CITY-ST-ZIP	LANTANA FL 33462
TITLE	PS
NAME	LINDROOS, KARL
STREET ADDRESS	1419 LANDS END RD.
CITY-ST-ZIP	LANTANA FL 33462
TITLE	PS
NAME	LINDROOS, KARL
STREET ADDRESS	1419 LSNDS END RD.
CITY-ST-ZIP	LANYANA FL 33462
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
(Six blank entries, each with Title, Name, Street Address, City-St-Zip and ☐ Change ☐ Addition)

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)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
KARL LINDROOS

Date: 4/17/95 Daytime Phone: 407-588 0095

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