PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9200006792

1. Corporation Name

## FILED Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90065 031 \*\*\*150.00

	FUN 'N SUN, INC.							
Principal Place		Mailing Address						
1472 JORDAN I		12943 GULF BOULEVARD E SUITE 104						
CLEARWATER FL 34616 SUITE 104 US MADERIA BEACH FL 33708				DO NOT WRITE IN THIS SPACE				
		US			3. Date Incorporated or Qualifed			Ì
					11/23/1992		·	
2. Principal P	lace of Business	2a. Mailing Address	•	h. al	4, FEI Number		h <del></del>	pplied For
21 12991	VILLIAGE BIVA.	26 /2971	IAGE	BILL	, 59-3154588			lot Applicable
Suite, Apt.		Suite, Apt. #, etc.	MI		5. Certifcate of Status Desired			Additional Required
	E 4104	27 SUITE #   City & State	04		6. Election Campaign Financing			May Be
City & Stat		28 MADIERA B	EACH	. Fl.	Trust Fund Contribution			to Fees
Zip	Country	Zip	Country	1 2	8. This corporation owes the cur	rent year In	tangible	
24 3370	^ .	29 33708 31	o U.	5	Personal Property Tax.		Yes	<b>X</b> N∘
	9. Name and Address of Current			т	10. Name and Address of New	Registered	Agent 🚄	
	HADDE DETED 14		81	Name	•			
LENHARDT, PETER M.				Street Add	Iress (P.O. Box Number is Not Accept	able)	<del>-</del>	
	! Jordan Hills Court Arwater FL 34616							
LLE	ANYMIEN FL 34010		83					
			84	City			85 Zip	Code
			1			FI	<b></b>	
				L.,	ti aubmite this statement for the	DUITE OCC O	f changing if	e registered /
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes of Florida. Such change was auth	, the above	e-named con the corporati	poration submits this statement for the ion's board of directors. I hereby acce	purpose o	f changing it sintment as i	s registered registered
11. Pursuant office or i agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of the maniliar with, and accept the obligat	2 and 607.1508, Florida Statutes of Florida. Such change was auti ions of, Section 607.0505, Florid	, the above norized by a Statutes	e-named corporati	poration submits this statement for the ion's board of directors. I hereby acce	purpose o pt the appo	f changing it pintment as i	s registered registered
11. Pursuant office or agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of Templiar with, and accept the obligations of the control of	IN PETER IN.	LEN	rask	<u> </u>	ø	f changing it bintment as r 2-28-	s registered egistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agen	rask	ed when reinstating)	DATE	L-20-	<u> </u>
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS ANI	and title if applicable. (NOTE: Re	LEN	rask	<u> </u>	DATE	L-20-	ORS IN 12
SIGNATURE  12. TITLE	Signature, typed or printed name of registered agent OFFICERS ANI	t and title if applicable.  D DIRECTORS	egistered Agen	rask	ed when reinstating)	DATE	ND DIRECT	ORS IN 12
SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of registered agent OFFICERS ANI DP LENHARDT, PETER M III	t and title if applicable.  D DIRECTORS	13. 1.1 TITLE 1.2 NAME	rask	ed when reinstating)	DATE	ND DIRECT	ORS IN 12
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SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of registered agent OFFICERS ANI DP LENHARDT, PETER M III 1472 JORDAN HILLS COURT	t and title if applicable.  D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET	T ADDRESS	ed when reinstating)	DATE	ND DIRECT	ORS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS ANI DP LENHARDT, PETER M III 1472 JORDAN HILLS COURT	t and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S	T ADDRESS	ed when reinstating)	DATE	ND DIRECT	ORS IN 12
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14. 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 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 inchanged, or on an exact many twith an address, with all other like empowered.

SIGNATURE:

PETER M. LENHARDT III

3-23-99 (727) 847-2342

R2E034 (11/98