SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
95 JUL 21 PM 12:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P94000000445 (4)**

1. Corporate Name
SUN PALM HARBOR, INC.

Principal Place of Business
~~877 EXECUTIVE CENTER DRIVE WEST~~
~~SUITE 303~~
~~ST PETERSBURG FL 33702~~

Mailing Address
~~877 EXECUTIVE CENTER DRIVE WEST~~
~~SUITE 303~~
~~ST PETERSBURG FL 33702~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/04/1994
3a. Date of Last Report:

2. Principal Place of Business
21 [redacted] Alex Hern
Suite, Apt. #, etc.
22 [redacted]
City, State
23 [redacted]
24 [redacted] 25 US

2a. Mailing Address
26 [redacted] Alex Hern
Suite, Apt. #, etc.
27 [redacted]
City, State
28 [redacted], FLORIDA
Safety Harbor Country
29 [redacted] 34695 30 US

4. FEI Number: 59-3216626
Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. [illegible] ☐ **$5.00** May Be Added to Fees

8. The corporation has liability for intangible tax under s. 199.032 Florida Statutes. ☐ Yes ☐ No

34695

9. Name and Address of Current Registered Agent
~~MASCARA, ERNEST L~~
~~877 EXECUTIVE CENTER DRIVE WEST~~
~~SUITE 303~~
~~ST PETERSBURG FL 33702~~

10. Name and Address of New Registered Agent
81 Name: [redacted] Alex Hern
82 Street Address (P.O. Box Number is Not Acceptable): [redacted]
83 1102 Baysbore Blvd 34695
84 City: [redacted], Safety Harbor FL 85 Zip Code: [redacted]

11. Pursuant to the provisions of Sections [illegible] and [illegible] Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The 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 duties and obligations of Section 607.0505 Florida Statutes.

SIGNATURE: [illegible]

12. OFFICERS AND DIRECTORS
~~MASCARA, ERNEST L~~
~~877 EXECUTIVE CENTER DRIVE W, SUITE 303~~
~~ST PETERSBURG FL 33702~~

13. ADDITIONAL OFFICERS AND DIRECTORS
☐ Change X Add
P/S
JOHN CHIGOS
901 HAMMOCK PINES BOULEVARD
CLEARWATER, FLORIDA 34621
☐ Change X Add
D/V/T
ALEX HERN
1102 BAYSHORE BOULEVARD
SAFETY HARBOR, FLORIDA 34695 ☐ Add

CR2E034 (3/95)

14. I hereby certify that the information supplied with this filing is validated, formatted and does not qualify for the exceptions stated in Section 119.07(3)(i), Florida Statutes. Further, I 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 and validity as a manual signature along with any other document required to be filed pursuant to Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or is added to an attachment with an officer or director title.

SIGNATURE: JOHN CHIGOS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-10-95 (813) 724-1075

0102343 CP