Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90012 079 ***150.00

04-25-1999 90012 080 *****8.75

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Kathe ine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400003274

SUNSET	HARBOUR PRO	Perties, in	IC										
Principal Piac	e of Business		Mailing Addr	 ess					il.	abilab i iya kayil alail bali	il al lint bannt de	10 00 100 1111 11 11 11	
12929 98TH AVE N. LARGO FL 33776			12929 98TH AVE N. LARGO FL 33776										
EAROO I E SS	,,		U00 12 00					1		DO NOT V	VRITE IN TH	IS SPACE	
										corporated or Quali	fed		
2. Principal Place of Business			2a. Mailing A	ddress					4. FEI Nu	mber		A	or lied For
21			26						NOT	APPLICABLE		No	ot Applicable
Suite, Act.	#, etc.		Suite, Ap	t. #, etc.					5. Certifc	ate of Status Desire	ı 🛚	•	A Iditional equired
City & Stat	te		City & St	ate			·			n Campaign Financi	ng 🗆	, .	May Be
23 Zip	Cour	try	Zip		30	untry			8. This co	prporation owes the at Property Tax.	current year	ntangible	MNo
24	9. Name and Add	race of Current	29 Registered Age	ent	1301	Т				and Address of Ne	w Register	εd Agent	
	9. Name and Add	eas of Current	registeres Age	<u>""</u>		81	Name		•• ••			<u> </u>	
WAL	.TER, BARBARA J					00	0	<u> </u>	/D.O. Day	Number is Not Ass	ontoblo)		
12929 98TH AVE N.						82	Street	At dress	(P.O. BOX	Number is Not Acc	ehranie)		
LAR	GO FL 33776					83				· 			
						84	City				F	85 Zip	Code
office as	to the provisions of Se registered agent, or bo am familiar with, and ac Signature, typed or printed na	th, in the State c cept the obligati	f Florida. Such cons of, Section 6	hange was . 607.0505, Fl	authorize orida Sta	ed by i	ine corpo	oration s	Doard of (illrectors. I nereby a	DATE		
12.		OFFICERS AND			13	3			ADDITIO	ONS/CHANGES TO	OFFICERS		
TITLE	D		(.	DELETE	1.1	TITLE		Pre	side	ent/Direct	or	Change	Addition
NAME	Walter, Barbaf				1.2	NAME		Bar	bara	J. Walte	er		
STREET ADDRESS		N.			1.3	STREET	ADDRESS			8th Ave. Fl 33776			
CITY-ST-ZIP	LARGO FL 33776					CITY-ST	-ZIP	Lar	go,	<u>Fl 33776</u>	5		T Addies
TITLE			L] DELETE	1	TITLE		D/S				Change	Addition
NAME					1	NAME		Rar		F. Walte			
STREET ADDRESS							ADDRESS	129	79 9	8th Ave.	N.		
CITY-ST-ZIP	<u> </u>			T DELETE	_	CITY-S	T-ZIP	-Lar	'go,	Florida	33776	-1712	₹ Addition
TITLE			L	☐ OELETE		TITLE		י/ עון	Г			Cutudo	AT, wanter
NAME					ľ	NAME		1		J. Walter			
STREET ADDRESS	}						ADDRESS	1 1 2 3	29 9	8th Ave.N	Ι.		
CITY-ST-ZIP				DELETE	_	CITY-S	1-ZIP	⊢Lar	go, -	Florida	33776	Change	Addition
TITLE	}		·			NAME							_
NAME)						ADDDESS	.]					
STREET ADDRESS							ADDRESS	1					
CITY-ST-ZIP	 		Г	DELETE		CITY-ST	1- <u>LIF</u>					Change	Addition
TITLE			·			NAME							
NAME STREET ADDRESS					- 6		ADDRESS						
STREET ADDRESS	il				- 1	CITY-ST							
CITY-ST-ZIP TITLE	 			DELETE		TITLE		 				Change	Addition
MAME			•		6.2	NAME							

14. Hereb / certify that the information supplied with this filing does not qualify fir the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicate d 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, with all other like empowered.

SIGNATURE: SIGNATURE OF SIGNATU

NAME

STREET ADDRESS.

CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CR2E034 (11/98)