

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 994000028297

1. Corporation Name

SUN VENTURE OF MARATHON INC.

Principal Place of Business

Mailing Address

5000 OVERSEAS Highway
MARATHON, Florida
33050

2. Principal Place of Business

21 5000 Overseas Hwy

Suite, Apt. #, etc.

22 City & State
23 Marathon FL

24 Zip 33050 Country Monrovia

2a. Mailing Address

26 5000 Overseas Hwy

Suite, Apt. #, etc.

27 City & State
28 Marathon FL

29 Zip 33050 Country Monrovia

9. Name and Address of Current Registered Agent

DAVID P. KIRWAN

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4. FEI Number

650 481 421

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name CARLA J Brown

82 Street Address (P.O. Box Number is Not Acceptable)
5000 OVERSEAS Hwy.

83 City Marathon

FL 85 Zip Code 33050

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. 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 Carla J Brown

(NOTE: Registered Agent signature required when reinstating.)

2-9-99.
DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME Jeffrey Thomas
STREET ADDRESS 5000 Overseas Hwy.
CITY-ST-ZIP Marathon FL 33050

TITLE ☒ DELETE
NAME Michael Valdez
STREET ADDRESS 5000 Overseas Hwy.
CITY-ST-ZIP Marathon, FL 33050

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Chairman
12 NAME Clifford Thomas
13 STREET ADDRESS 12519 Persimmon Rd.
14 CITY-ST-ZIP Canton MI

21 TITLE Secretary
22 NAME Michael Brown
23 STREET ADDRESS 6984 Geige Rd
24 CITY-ST-ZIP Temperance, MI 48182

31 TITLE
32 NAME
33 STREET ADDRESS

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND FULL PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-99 734-947-1188

CR2E034 (11/98)