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Apr 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000035437 (0)

1. Corporation Name

SUNRISE FINANCIAL CONCEPTS INCORPORATED



Principal Place of Business

Mailing Address

1180 SPRING CENTRE
STE. #204
ALTAMONTE SPRINGS FL 32714

801 N. MAGNOLIA AVE.
STE. #201
ORLANDO FL 32803
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 251 PLAZA DRIVE

26 251 PLAZA DR.

Suite, Apt., etc.

Suite, Apt., etc.

22 SUITE A

27 SUITE A

City & State

City & State

23 OUIEDO, FL.

28 OUIEDO, FL.

Zip

Country

Zip

Country

24 32765

25 SEMINOLE

29 32765

30 SEMINOLE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ATKINS, JOHN PRES.
1180 SPRING CENTRE S. BLVD.
STE. #204
ALTAMONTE SPRINGS FL 32714

81 Name JAMES F. GRIDER - PRESIDENT

82 Street Address (P.O. Box Number is Not Acceptable)
251 PLAZA DRIVE, SUITE A

83

84 City OUIEDO

FL

85

Zip Code 32765

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

JAMES F. GRIDER

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-13-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DST
NAME GRIDER, JAMES F
STREET ADDRESS 1180 SPRING CENTRE SOUTH BLVD, #204
CITY-ST-ZIP ALTAMONTE SPRINGS FL

1.1E
1.1ME
1.1EET ADDRESS
1.1Y-ST-ZIP

PRESIDENT
JAMES F. GRIDER DP
251 PLAZA DRIVE
OUIEDO, FL 32765

TITLE DP
NAME ATKINS, JOHN
STREET ADDRESS 1180 SPRING CENTRE S BLVD #204
CITY-ST-ZIP ALTAMONTE SPRINGS FL

2.1E
2.1ME
2.1EET ADDRESS
2.1Y-ST-ZIP

JOHN ATKINS V.P. DST
251 PLAZA DR.
OUIEDO, FL 32765

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1E
3.1ME
3.1EET ADDRESS
3.1Y-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1E
4.1ME
4.1EET ADDRESS
4.1Y-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1E
5.1ME
5.1EET ADDRESS
5.1Y-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1E
6.1ME
6.1EET ADDRESS
6.1Y-ST-ZIP

Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the option stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate; 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.

CR2E034 (10/97)