FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENDE STATE

FILED

Apr 20 1998 8:00am

Secretary of State

Sandra B. Mortam

Secretary of Ste DIVISION OF CORPORTIONS

1998

DOCUMENT # P94000035437 (U)					
SUNRISE FINANCIAL CONCEPTS INCORPORATED					
OUNNIS	SE PHANICIAL CONCLY TO III	IOONI ONATED		4 1884 (BB) IN 1814 BIBLE BEIN BEIN BOIN BOIN BOIN	ITI TIKI BATAN MAK INGK INGK
Principal Plac	e of Business	Mailing Address		a samusan dan dalah d	iol alik oldok ikil isal isal
1180 SPRING		801 N. MAGNOLIA AVE.			
STE. #204		STE. #201	1		
ALTAMONTE !	SPRINGS FL 32714	ORLANDO FL 32803	l l	DO NOT WRITE IN THIS	SPACE
		US		3. Date Incorporated or Qualified 05/09/1994	
9 Principal P	Place Business	2a. Mailing Address	-	4. FEI Number	Applied For
21 25	1 PLAZA DRIVE	26 251 P4	tz Ur.	59-3241907	Not Applicable
Suite, Apt		Suite, Apt. #, etc.	,		\$8.75 Additional
22 506	re A	27 DUITE A		5. Certificate of Status Desired	Fee Required
City & Stat	•	City & State	=1	6. Election Campaign Financing	\$5.00 May Be
23 (2) (1)	500 H.	28 001800	1 5	Trust Fund Contribution	Added to Fees
ZN ~~	Country Samuel	╡ ┌ ╗╬┰╱ <i>┍</i> ╴├	T SMINDLE	8. This corporation owes or has paid the c	
24 5-1	65 25 SEMINOLE	Positional Appel	0 4	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
81 Name - C. C. ' A					
AIKINS, JUHN PRES.					F510ENT
	80 SPRING CENTRE S. BLVD.		82 Street Add	ress (P.O. Ox Number is Not Acceptable)	SUITE A
	E. #204 Tamonte springs FL 32714		83	J 1 DI	<u> </u>
~	IAMONIE OFFINGS FL 32/14				
:			84 City CO	UIEDD FI	- 85 ZID COOR 5
44. Pursuant to the provisions of Society 607 0502 and 607 1508. Florida Statutes, theoretical proportion submits this statement for the purpose of changing its registered					
office or registered agent, or both, in the Stale of Florida Such change was authoril 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 SNes.					
SIGNATURE	/	saider	- Story). HIXE 443	3 -9 2
SIGNATORE	Signature, typed of printed name of registered agoni	t and title if applicable (NOTE I	Regist-Agent signature requi		
12.	OFFICERS AND		1 0	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
TITLE	DST OPIDED MARKED E	☐ DELETE	1,1E	TAMES F. GRIGGN	Criarige Admitton
NAME	GRIDER, JAMES F	I DI VO 4004	1.ME 1.4EET ADDRESS	AMED H. GRIVET	
STREET ADDRESS	1180 SPRING CENTRE SOUTH ALTAMONTE SPRINGS FL	I DLVD, #204		miliano FL 347	45
CITY-ST-ZIP TITLE	DP	DELETE	1./Y-ST-ZIP 2.1E	ATTENDED TO THE	Change Addition
NAME	ATKINS, JOHN	La Mercie	2.ME	CIATA OA	one go
STREET ADDRESS	1180 SPRING CENTRE S BLVD	. #204	2.SEET ADDRESS	151 PLAZA WK.	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	, AEG1	2.fY-ST-ZIP	raliedo Fl. 3	2765
TITLE	TETANOTTE OTTATO TE	DELETE	3.LE		☐ Change ☐ Addition
NAME			3.ME		
STREET ADDRESS			3.5EET ADDRESS		
CITY-ST-ZIP			3./Y-S1-ZIP		
TITLE					Change Addition
	[☐ DELETE	4,±E		
NAME		☐ DELETE	4.1E 4.ME		C Oninge C Podition
NAME STREET ADDRESS		☐ DELETE	I i		Country
1		-	4.ME 4.Jeet address 4.Y-ST-ZIP		
STREET ADDRESS		DELETE	4. ME 4. Seet address		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP		-	4.ME 4.JEET ADDRESS 4.Y-ST-ZIP 5.:E 5.JE		
STREET ADDRESS CITY-ST-ZIP TITLE		-	4.ME 4.JEET ADDRESS 4.Y-S1-ZIP 5.LE 5.ME 5.EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		[_] DELETE	4.ME 4.JEET ADDRESS 4.JY-ST-ZIP 5.IE 5.JAE 5.EET ADDRESS 5.Y-ST-ZIP		Change Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		[_] DELETE	4.ME 4.JEET ADDRESS 4.JY-ST-ZIP 5.IE 5.JAE 5.EET ADDRESS 5.Y-ST-ZIP		Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the aption stated in Section 119.07(3)(i), Fiorida 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 executis report as required by Charter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.