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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Northam

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9500001322 (3)

SUNLIGHT PROMOTIONS, INC. Principal Place of Business Mailing Address 6415 MANATEE AVE W BRADENTON FL 84209 8415 MANATEE AVE W **BRADENTON FL 34209** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/02/1995 2. Principal Place of Business
11 4768 8 Pywcocl 4. FEI Number 2a. Mailing Address Applied For 4768 BAYWOOD PT.S. Not Applicable 65-0550509 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible υS 30 Personal Property Tax due June 30. Yes No. . Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DEFIBAUGH, DAVID A 6415 MANATEE AVE W Street Address (P.O. Box Number is Not Acceptable) R2 **BRADENTON FL 34209** 83 Zip Code 84 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 Signature, typed or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE DEFIBAUGH, DAVID A NAME 1.2 NAME 4768 BAYWOOD PTS. -6415 MANATEE AVE W 1.3 STREET ADDRESS STREET ADDBESS GULFPORT FL 33711 Bradenton Fl 34209 1.4 CITY-ST-ZIP CITY-ST-Z DELETE TITLE 2.1 TITLE Change ☐ Addition MANGIE, EDWARD NAME 2.2 NAME P O BOX 5245 STREET ADDRESS 2.3 STREET ADDRESS YOUNGSTOWN FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition TITLE DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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.

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

July

David A. Defibaugh

4-20-98

813-323-6003

FILED

May 13 1998 8:00am

Secretary of State