2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

SIGNATURE:

aρ address, with all other like empowered.

Mar 06, 2001 8:00 am Secretary of State DOCUMENT # P95000027439 SUNNYLAND CLEARING, INC. 03-06-2001 90298 026 ***150.00 Mailing Address Principal Place of Business 2006 13TH STREET 2006 13TH STREET VERO BEACH FL 32960 VERO BEACH FL 32960 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0581617 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MARTIN, RICHARD B Street Address (P.O. Box Number is Not Acceptable) 2006 13TH STREET VERO BEACH FL 32960 Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE MARTIN, RICHARD B NAME NAME STREET ADDRESS STREET ADDRESS **2006 13TH STREET** CITY-ST-7IP CITY-ST-ZIP VERO BEACH FL 32960 ☐ Change Addition ☐ Delete TITLE TITLE MARTIN, JUDY D NAME NAME STREET ADDRESS STREET ADDRESS 2006 13TH ST CITY-ST-ZIP CITY-ST-7IP VERO BEACH FL 32960 ☐ Change Addition Delete. TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete TITLE Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if

FILED

Daytime Phone #