

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

**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90080 008 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000062927**

1. Corporation Name  
**SULLNETT, INC.**



Principal Place of Business 925 15TH PLACE VERO BEACH FL 32960	Mailing Address 925 15TH PLACE VERO BEACH FL 32960
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>5898 62nd LANE</b>		2a. Mailing Address 26 <b>5898 62nd LANE</b>		3. Date Incorporated or Qualified <b>08/14/1995</b>	Applied For <input type="checkbox"/> No: Applicable
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number <b>59-3332686</b>	
23 City & State <b>VERO BEACH</b>		28 City & State <b>VERO BEACH</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
24 Zip <b>32967</b> 25 Country <b>USA</b>		29 Zip <b>32967</b> 30 Country <b>USA</b>		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SULLIVAN, TERENCE 925 15TH PLACE VERO BEACH FL 32960		10. Name and Address of New Registered Agent			
		81 Name <b>SWINE</b>			
		82 Street Address (P.O. Box: Number is Not Acceptable) <b>5898 62nd LANE</b>			
		83			
		84 City <b>VERO BEACH</b>	FL	85 Zip Code <b>32967</b>	

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: *Terence P. Sullivan* V.P. DATE: **4/16/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SULLIVAN, TERENCE	1.2 NAME	<b>5898 62nd LANE</b>
STREET ADDRESS	6165 S MIRROR LAKE DR #310	1.3 STREET ADDRESS	<b>VERO BEACH FL 32967</b>
CITY-ST-ZIP	SEBASTIAN FL 32958	1.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SULLIVAN, CATHERINE A	2.2 NAME	<b>5898 62nd LANE</b>
STREET ADDRESS	6165 S MIRROR LAKE DR #310	2.3 STREET ADDRESS	<b>VERO BEACH FL 32967</b>
CITY-ST-ZIP	SEBASTIAN FL 32958	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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: *Terence P. Sullivan* DATE: **4/16/99** DAYTIME PHONE #: **561-770-5889**

CR2E034 (11/98)