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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000073754 (0)

SUN POWER SOLAR & POOL COMPANY

FILED Feb 21 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				T SOUTHWAY WITH THE INTERNITY OF THE BOOK SOUTH SOUTH SOUTH THE CONTRACT OF TH			
5826 BAHIA VISTA DR. SARASOTA FL 34232			5828 BAHIA VISTA DR. SARASOTA FL 34232-2969						
						3. Date Incorporated or Qualified 09/19/1995	3a. Date of 05/01/1	Last R 996	eport
2. Principal Place of Business 21		2a. Mailing Address 26				4. FEI Number 65-0616789	Applied For Not Applicable		
Suite, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & State	e	City & State				Election Campaign Financing Trust Fund Contribution	□ \$	5.00 \dded	May Be to Fees
Zip	Country	Ζφ	<u> </u>	untry	'	8. This corporation has liability for i			. 199.032,
24	25	29	30				Yes No		······································
	9, Name and Address of Curre	ent Registered Agent			T .:	10. Name and Address of New Re	latered Agen	<u> </u>	
	VAK, RICHARD H			81	Name				
5828 BAHIA VISTA DR. SARASOTA FL 34232				82	Street Add	ress (P.O. Box Number is Not Acceptable)			
				83					
				84	City		FL 85	Zip	Code
11 Pursuant	to the provisions of Sections 607.09	502 and 607 1508. Florida St	tatutes the a	lbov.	e-named cor	poration submits this statement for the p		l Jaina it	s registered
office or r agent. I a	registered agent, or both, in the Sta im familiar with, and accept the obli	te of Florida. Such change w gations of, Section 607.0505	vas authorize 5, Florida Sta	d by	the corpora s.	tion's board of directors. I hereby accep	t the appointm	ent as	registered
SIGNATURE	Signature, typed or punted name of registered a	nent and title if applicable	(NOTE: Register)	od Age	ent signature rece	(red when reinstating)	DATE	<u></u>	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	CTOR	S IN 12
TITLE	D	DELETE	1.1 T	ITLE				hange	Addition
NAME	NOWAK, RICHARD H		1.21	IAME	Ì				
STREET ADDRESS	5828 BAHIA VISTA DR.		1.3 \$	TREET	ADDRESS				
CITY - ST - ZIP	SARASOTA FL 34232		1.4 0	HTY-S	ST-ZIP				
TITLE		DELETE	2.1]	ITLE				Change	Addition
NAME			2.2 N	IAME					
STREET ADDRESS			2.3 9	TREET	ADDRESS				
City-St-Zip			2.4	CITY-	ST-ZIP				
TITLE		DELETE						Change	☐ Additio
NAME			3.21	IAME	[
STREET ADDRESS			3.3 9	TREET	ADDRESS				
CITY - \$1 - ZIP			3.4.	CITY-	ST-ZIP	F			
TITLE		DELETE		• • • • • • • • • • • • • • • • • • • •		——————————————————————————————————————		Change	Addition
NAME			4.2	NAME		.v.			
STREET ADDRESS			4.3 5	TREET	ADORESS				
CITY-SI-ZIP					ST-ZIP				
TITLE		DELETE		_	<u> </u>			hange	Addition
NAME				IAME					
STREET ADDRESS					ADDRESS		•		
CITY-S1-ZIP					ST-ZIP				
TITLE		DELETE		-	-	Neg		hange	☐ Addition
NAME				IAME		•:		•	
STREET ADDRESS					ADDRESS				
CHTY-ST-ZIP	l		5.40	/11Y-5	ST-ZIP				

14. I do 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 indicators of 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 12 or Block 12 or on an affairment with an address.

SIGNATURE

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Richard H. Nowak, J.

(941)378-1515

Daytime Phone #