

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000077279

1. Entity Name

SUN COUNTRY PROPERTY MANAGEMENT SERVICES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN -9 PM 2:24

Principal Place of Business

Mailing Address

3671 WEBBER ST. SUITE B
SARASOTA FL 34232

3626-B WEBBER ST.
SARASOTA FL 34232-4413

2. Principal Place of Business

3074 17th STREET

3. Mailing Address

3074 17th STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34234

Country

USA

Zip

34234

Country

USA

4. FEI Number

65-0633749

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MC KEAN, PAUL L
3671 WEBBER ST, SUITE B
SARASOTA FL 34232

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 Paul McKean

Signature, typed or printed name of registered agent also required if applicable

(NOTE: Registered Agent's signature required when resigning)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CULVER, DENNIS 2709 SWEETLAND AVE SARASOTA FL 34232 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALCHUS, ROBERT W 1750 BEN FRANKLIN DR 7E SARASOTA FL 34236 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CULVER, DOROTHY 2709 SWEETLAND AVE. SARASOTA FL 34232 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DENNIS CULVER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/00

955-8989

Daytime Phone #

6/9