2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000089416

1. Entity Name

SUNRISE PROPERTIES OF FT. PIERCE, INC.



FILED Mar 19, 2003 8:00 am Secretary of State

03-19-2003 90142 015 ***150.00

			\$ 500 WE 18-8	'	
Principal Place of Business 203 SOUTH 29TH ST. FT. PIERCE FL 34947		Mailing Address 203 SOUTH 29TH ST. FT. PIERCE FL 34947		> 1881(189) (10 180(18 0))))	: 18(:) 88() 18() 18() 18() 18() 18() 18() 18(
2. Principal Place of	Business	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State					RE IF MAKING CHANGES
		City & State		- 4. FEI Number 65-07078	87 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desire	d S8.75 Additional Fee Required
6. 1	Name and Address of Current	Registered Agent	<u> </u>	7. Name and Address of Nev	
			Name		
SLAY, BETTY J	i i	•	Street Address (P.O. Box Number is Not Acceptable		ublo)
203 SOUTH 29T	H ST.		Street Addres	ss (F.O. Box Number is Not Accepta	.ble)
FT. PIERCE FL 3	34947				*****
			City		FL Zip Code
8. The above named	entity submits this statement for	r the purpose of changing its	registered office or regis	stered agent, or both, in the State of	Florida. I am familiar with, and accept
the obligations of	registered agent.		- G		Tioned. Tan lanska with and accept
SIGNATURE	\$				
	typed or printed name of registered agent a	and title if applicable. (NOT	E: Registered Agent signature requ	uired when reinstating)	DATE
FILE NO	W!!! FEE IS \$150.00				
	, 2003 Fee will be \$550.00			9. Election Campaign	
	le to Florida Department of	State		Trust Fund Contribu	ition. Added to Fees
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO O	PFFICERS AND DIRECTORS IN 11
TITLE D		☐ Delete	TITLE		☐ Change ☐ Addition
	BETTY J		NAME		
	OUTH 29TH ST.		STREET ADDRESS		
	ERCE FL 34947		CITY-ST-ZIP		
TITLE DP	DODEDY I	☐ Delete	TITLE		☐ Change ☐ Addition
	ROBERT L OUTH 29TH STREET-		NAME	to provide the second second	
	PIERCE FL 34947		STREET ADDRESS CITY-ST-ZIP	·	oggi o medit orio di la companya d
TITLE DVPT		☐ Delete	TITLE	· -	☐ Change ☐ Addition
NAME WILLIA	AMS, SANDRA A		NAME .		
CITY-ST-ZIP FORT	GERMANY CANAL ROAD PIERCE FL 34988		STREET ADDRESS CITY-ST-ZIP		
TITLE DS	FIENCE FL 34900				
	, JULIE A	☐ Delete	TITLE .		☐ Change ☐ Addition
	KINGS HIGHWAY		STREET ADDRESS		
	PIERCE FL 34947		CITY-ST-ZIP		
TITLE D		☐ Delete	TITLE		☐ Change ☐ Addition
	RSEN, DEBORAH S		NAME		Change Addition
	ARDEN AVENUE		STREET ADDRESS		·
· · · · · · · · · · · · · · · · · · ·	PIERCE FL 34950	111.	CITY-ST-ZIP		
TITLE D	DIGITADD 0	Delete	TITLE	100	. Change Addition
	RICHARD S		NAME		
	BRIARCREST DRIVE		STREET ADDRESS		
	IOMA CITY OK 73072		CITY-ST-ZIP		
indicated on this r	at the information supplied with t eport or supplemental report is t	this tiling does not qualify for true and that m	the exemption stated in:	Section 119.07(3)(i), Florida Statutes	s. I further certify that the information
of the corporation changed, or on an	or the receiver or trustee en pov	wered to execute this report a	is required by Chapter 6	07, Florida Statutes; and that my nar	s. Flurther certify that the information or oath; that I am an officer or director me appears in Block 10 or Block 11 if

SIGNATURE: