

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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morthem Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000010638 (9)**

1. Corporation Name

SUNSHINE BUILDING CORPORATION

Principal Place of Business

~~5606 U.S. 27 NORTH~~
SEBRING FL 33872

Mailing Address

~~5606 U.S. 27 NORTH~~
SEBRING FL 33872



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/30/1997

2. Principal Place of Business

21 5825 US 27 North

Suite, Apt. #, etc.

22

City & State

23 Sebring, FL

Zip

24 33870

Country

25 Highlands

2a. Mailing Address

26 5825 US 27 North

Suite, Apt. #, etc.

27

City & State

28 Sebring, FL

Zip

29 33870

Country

30 Highlands

4. FEI Number

05-0728167

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**GAINES, ROBERT
5606 U.S. 27 NORTH
SEBRING FL 33872**

10. Name and Address of New Registered Agent

81 Name

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

5825 US 27 North

83

84 City

Sebring

FL

85 Zip Code

33870

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

[Signature]
Signature: typed or printed name of registered agent; and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

12. TITLE **D** ☐ DELETE

NAME **SANDLIN, FRED J**
STREET ADDRESS **5606 U.S. 27 NORTH**
CITY-ST-ZIP **SEBRING FL 33872**

13. TITLE **D** ☐ DELETE

NAME **GAINES, ROBERT**
STREET ADDRESS **5606 U.S. 27 NORTH**
CITY-ST-ZIP **SEBRING FL 33872**

☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS **5825 US 27 North**
1.4 CITY-ST-ZIP **Sebring, FL 33870**

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS **5825 US 27 North**
2.4 CITY-ST-ZIP **Sebring, FL 33870**

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS **700002480217**
5.4 CITY-ST-ZIP **-04/06/98--01097--013**
*****750.00**

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE

CP2E034 (10/97)