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

PROFIT CORPORATION ANNUAL REPORT

1998

850 3RD ST

CEDAR KEY FL 32625



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P9700033804 (0)**

SUNDANCE CONSULTANTS, INC.

Mailing Address Principal Place of Business BSO 3RD ST P O BOX 265 CEDAR KEY FL \$2625 CEDAR KEY FL 32625 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified <u>04/15/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MILLER, SHRADER

82

83

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

Jun 23 1998 8:00am Secretary of State

Zip Code

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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE [BO] Bog stored Agent signal ire required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change noilibbA 🔲 DELETE 1.1 111118 TITLE MILLER, SHRADER 1.2 NAME NAME 850 3RD ST STREET ADDRESS 1.3 STREET ADDRESS **CEDAR KEY FL 32625** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DETLIE TITLE 21 TITLE WRIGHT, KATHLEEN 22 NAME NAME 850 3RD ST 2.3 STREET ADDRESS STREET ADDRESS CEDAR KEY FL 32625 CITY-ST-ZIP 2 4 CiTY - ST - ZIP DULL __ Change Addition TITLE 3 1 111LE NAME 3.2 NAME STREET ADORESS 3 3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-\$1-20* DELETE Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-Ziff 54 CITY-ST-7IP .] Change __ DELETE Addition TITLE 61 TITLE \$4**0.61.636.**2225.710.33**.7** --06/24/98---01008---017 6 2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS **等米**和15月。[6] CITY-ST-ZIP 6.4 CITY - ST- ZIP

14. Thereby cortify 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 of pupplieries and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation on the increment or tousice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of that my name appears in the property of the corporation of the