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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000048534

SUNNY NAPLES, INC.

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90070 006 ***150.00



Principal Place of Business Mailing Address							T TO BELLEVA IN THE COURT OF TH
5100 TAMIAMI TRAIL NORTH. SUITE 201 NAPLES FL 34103			5100 TAMIAMI TRAIL NORTH. SUITE 201 NAPLES FL 34103				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed
		1-	5 4 17 4 1 1		_		06/02/1997 4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Add			Mailing Address	Address			4. FEI Number Applied For S9-3450885 Not Applicable
21 Suite, Apt. #, etc.			Suite, Apt. #, etc.				\$8.75 Additional
22		27					5. Certificate of Status Desired Fee Required
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip Country 24 25			Zip Country				8. This corporation owes the current year Intangible Personal Property Tax. Yes No
	9. Name and Address of Curre						10. Name and Address of New Registered Agent
		-		81		Name	
SZEMPRUCH, DAVID J 5100 TAMIAMI TRAIL NORTH, SUITE 201				82	: :	Street Addres	ss (P.O. Box Number is Not Acceptable)
NAPLES FL 34103			<i>1</i> 1		-		·
				84	ˈl ˈ	City	FL 85 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. 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 age	ent and title if	applicable. (NOTE: F	Registered Age	nt si	gnature required v	
12.	OFFICERS AI	ND DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VP		☐ DELETE	1.1 TITLE			. ☐ Change ☐ Addition
NAME	DAVID J STEMPRUCH, P.A.			1.2 NAME			
STREET ADDRESS	5100 N TAMIAMI TRAIL #201			1.3 STREE		1	ļ
CITY-ST-ZIP	NAPLES FL 34103		□ pc: ctr	1.4 CITY-S	ST-Z	IP	Change Addition
TITLE			☐ DELETE	2.1 TITLE			
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREE		[1
CITY-ST-ZIP			☐ DELETE	2. 4 CITY-5 3.1 TITLE	\$1-2	ZIP	. Change Addition
TITLE NAME			- Decerte	3.2 NAME			
				3.3 STREE	ΤΑΓ	NDESS	
STREET ADDRESS				3.4. CITY-5			
CITY-ST-ZIP TITLE			☐ DELETE	4.1 TITLE	31-2	<u>ur</u>	☐ Change ☐ Addition
NAME				4, 2 NAME			
STREET ADDRESS				4.3 STREE		DORESS	
CITY-ST-ZIP				4.4 CITY-S		1	
TITLE			☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREE	TAE	ODRESS	
CITY-ST-ZIP	1			5.4 CITY-S	ST-Z	JP 91	
TITLE			DELETE	6.1 TITLE			. Change Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREE	TAE	DORESS	
				64 CITY O	· -	un l	

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, with all other like empowered.

SIGNATURE: