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Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90023 030 ***150.00

PROFIT CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000058623 ✓

1. Corporation Name
A SunStation of Gainesville, Inc.
2614 SW 34th St Ste 4
Gainesville, FL 32608

Principal Place of Business Mailing Address
2614 SW 34th St Ste 4
Gainesville, FL 32608

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
8/97

4. FEI Number
59-3455659

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

7. Trust Fund Contribution ☐

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address

21 Same 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

Quinn Ray Blitch
2056 NW 55th Blvd Apt B-5
Gainesville, FL 32653

10. Name and Address of New Registered Agent

81 Name

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

83

84 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 Quinn Ray Blitch 6-28
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<u>President</u> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<u>Quinn Ray Blitch</u>	1.2 NAME	
STREET ADDRESS	<u>2056 NW 55th Blvd Apt B-5</u>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<u>Gainesville, FL 32653</u>	1.4 CITY-ST-ZIP	
TITLE	<u>Vice-President</u> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<u>Kathy D. Blitch</u>	2.2 NAME	
STREET ADDRESS	<u>2056 NW 55th Blvd Apt B-5</u>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<u>Gainesville, FL 32653</u>	2.4 CITY-ST-ZIP	
TITLE	<u>Sec. Treas.</u> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<u>Toni K. Lee</u>	3.2 NAME	
STREET ADDRESS	<u>132 NW 13th St</u>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<u>Gainesville, FL 32601</u>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

Toni K. Lee

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-1-99
Date

352-335-3999
Daytime Phone #

CR2E034 (11/98)