FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mojtham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 POCUMENT # . 'P97000105432 (3) SUNSET RIDGE SERVICES, INC. Principal Place of Business Mailing Address 8204 LIME TREE WAY 8204 LIME TREE WAY **ELLENTON FL 34222 ELLENTON FL 34222** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/15/1997 2. Principal Place of Business 2a. Mailing Address Applied For 08054 21 26 Not Applicable Suite, Apt. #, etc. Suito, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GARST, CLAFLIN JR. 4804 MANATEE AVE. WEST Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34209** 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 are tamiliar with, and accept the obligations of, Section 607 0505, Florida Statutes. DAVID C. Young residen OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition YOUNG, DAVID C NAME 1.2 NAME STREET ADDRESS 8204 LIME TREE WAY 1.3 STREET ADDRESS **ELLENTON FL 34222** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change ___ Addition NAME SMITH, WARREN D 2.2 NAME STREET ADDRESS 7812-22 AVE. WEST 2.3 STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209** 2.4 CITY-ST-ZIP TITLE DELETE Change Addition

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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 of truesder amovement of the receiver of truesder 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 of truesder 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 of the receiver of truesder 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 of the receiver of truesder of the corporation of the receiver of the receiver of the corporation of the receiver he same legal effect as it made under oath; that I am an ter 607, Florida Statutes; and that my name appears in PRESIDEM

3.2 NAME

4.1 TITLE

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5.2 NAME

6.1 TITLE

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DELETE

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3.3 STREET ADDRESS

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