CR2E034 (11/98)



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000106241

THE SUNSHINE SHOP, INC.

Principal Place of Business

Mailing Address

FILED 99 JUL 29 MM 9: 51 LA CAMPARY OF STATE

| - ( ( <b>48</b> 0( <b>(40</b> ) ()) () | id 100ki 90dii 60dii | ACCOL ILLUI COLLO | I ( |
|--|----------------------|-------------------|-----|

| 645 A1A BEACH BLVD.<br>ST. AUGUSTINE FL 32084 |   | 645 A1A BEACH BLVD.<br>ST. AUGUSTINE FL 32084 |   |   |  |
|---|---|---|---|---|--|
|   |   |   |   | DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 12/15/1997  | SPACE  |
| 2. Principal Pi                               | lace of Business  | 2a. Mailing Address                           |   | 4. FEI Number   | Applied For                                    |
| 21  |   | 26  |   | 59-2896436  | Not Applicable                                 |
| Suite, Apt                                    | #, etc  | Suite, Apt. #, etc.                           |   |   | \$8.75 Additional                              |
| 22  |   | 27  |   | 5. Certificate of Status Desired  | Fee Required                                   |
| City & Stati                                  | е   | City & State                                  |   | 6. Election Campaign Financing  | \$5.00 May Be                                  |
| 23  |   | 28  |   | Trust Fund Contribution   | Added to Fees                                  |
| Zip   | Country   | Zip   | Country                                   | 8. This corporation owes the current year In  |  |
| 24  | 25  | 29 30   |   | Personal Property Tax. [] Yes   |  |
|   | 9. Name and Address of Curren   | t Registered Agent                            |   | 10. Name and Address of New Registered  | Agent  |
|   |   |   | 81 Name                                   |   |  |
| GREENE, ALAN                                  |   | 82 Street Add                                 | dress (P.O. Box Number is Not Acceptable) |   |  |
| 645 A1A BEACH BLVD.                           |   |   | 02 Street A00                             | iress (P.O. Box Noriber is Not Acceptable)  |  |
| ST. AUGUSTINE FL 32084                        |   |   | 83  |   |  |
| l   |   |   |   |   | - ,- <u></u>                                   |
|   |   |   | 84 City                                   | FI  | 85 Zip Code                                    |
| office or re                                  | to the provisions of Sections 607.050;<br>egistered agent, or both, in the State<br>m familiar with, and accept the obligat | of Florida. Such change was au                | thorized by the corporal                  | poration submits this statement for the purpose of<br>lion's board of directors. I hereby accept the appo | changing its registered intraent as registered |
| SIGNATURE                                     |   |   |   |   |  |
| <del></del>                                   | Signature, typed or printed name of registered agen   |   | Registered Agent signature requin         |   |  |
| 12.   | OFFICERS AN   | D DELETE                                      | 13.                                       | ADDITIONS/CHANGES TO OFFICERS A   |  |
| TITLE   | OP ALAM   | C Detele                                      | 1.1 TITLE                                 |   | Change Addition                                |
| NAME  | GREENE, ALAN  |   | 12 NAME                                   |   |  |
| STREET ADORESS                                | 645 A1A BEACH BLVD  |   | 1.3 STREET ADORESS                        |   |  |
| CITY-ST-ZIP                                   | ST AUGUSTINE FL 32084   |   | 1.4 CITY-ST-ZIP                           | _ · · · · - · · ·   | <u></u>  |
| TITLE   | DS  | [] DELETE                                     | 21 TITLE                                  |   | ☐ Change ☐ Addition                            |
| NAME  | GREENE, LYNN  |   | 2.2 NAME                                  | 500 <u>0</u> 02956  | 342  |
| STREET ADDRESS                                | 645 A1A BEACH BLVD  |   | 2 3 STREET ADDRESS                        | -U8/10/33-1<br>***150.00  | -010 <b>6</b> 1012  <br>) ****150.00           |
| CTY-ST-ZIP                                    | ST AUGUSTINE FL 32084   |   | 2 4 CITY-ST-ZIP                           | ####130.UL  | J *****13U.UU                                  |
| TITLE   |   | ☐ DELETE                                      | 31TITLE                                   |   | ☐ Change ☐ Addition                            |
| NAME  |   |   | 3.2 NAME                                  |   |  |
| STREET ADDRESS                                |   |   | 33 STREET ADDRESS                         |   |  |
| CITY-ST-ZIP                                   |   |   | 34. CITY-ST-ZIP                           |   |  |
| TITLE   |   | ☐ DELETE                                      | 4.1 TITLE                                 |   | Change Addition                                |
| NAME  |   |   | 4.2 NAME                                  |   |  |
| STREET ADDRESS                                |   |   | 4.3 STREET ADDRESS                        |   |  |
| CITY-ST-ZIP                                   |   |   | 44 CITY-ST-ZIP                            |   |  |
| TITLE   |   | ☐ DELETE                                      | 5.1 TITLE                                 |   | ☐ Change ☐ Addition                            |
| NAME  |   |   | 52 NAME                                   |   |  |
| STREET ADDRESS                                |   |   | 53 STREET ADDRESS                         |   |  |
| CITY-S1-ZIP                                   |   |   | 54 CITY-ST-ZIP                            |   |  |
| TITLE   | <u> </u>  | DELETE  | 6.1 TITLE                                 |   | Change Addition                                |
| NAME  |   |   | 62 NAME                                   |   | Thomas Changes                                 |
| 1   |   |   | 63 STREET ADDRESS                         |   |  |
| STREET ADDRESS                                |   |   | 64 CITY-ST-ZIP                            |   | 110  |
| LSTY ST. 7IP                                  |   |   | = 0 * O(11.01.20"                         |   | 1 . 1/4./                                      |

4. 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, of officer or director of the corporation or the receiver or bustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name ap Block 13 if chyflogod or on an attagning to the product of the corporation or the receiver or bustee the product of the corporation or the receiver or bustee the product of the corporation of t

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_

## R.J. PACETTI, PÀ CERTIFIED PUBLIC ACCOUNTANT

2760 U.S. 1 SOUTH ST. AUGUSTINE, FLORIDA 32066 TELEPHONE (904) 797-5533 FAX (904) 797-6060

July 16,1999

R.J. (JACK) PACETTI, CPA

Mrs. Katherine Harris
Secretary of State
Division of Corporations
Florida Department of State
P O Box 1500
Tallahassee, FL. 32302-1500

Re: Sunshine Shop, Inc.

Dear Mrs. Harris,

I am writing on behalf of my client Mr. Alan Greene, President of Sunshine Shop, Inc.

Just before the May 1, 1999 deadline for filing the 1999 annual report, Mr. Greene's mother (who lives in south Florida) became ill and had surgery. Alan was at his mother's side during her illness. As she was recovering, Alan son, who was vacationing in Barbatos was attacked and hospitalized. Alan went to Barbatos and brought his son home. In the confusion of the above events, Alan failed to file the annual report and has just realized this fact. We are asking for your help. The Sunshine Shop, Inc. is a tourism-related retail business which is still trying to recover from the 1998 forest fire disaster. The abatement of the penalty due to the late-filed annual report would be a big help to this small business.

Thank you for your assistance in this matter. We are sending the 150.00 required in hopes that you will abate the penalty.

Sincerely,

Pacetti CPA