

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

FILED May 13, 1999 8:00 am Secretary of State

05-13-1999 90002 002 ***158.75

DOCUMENT # P98000002673

1. Corporation Name

Sun Medical Foundation, Inc.

Principal Place of Business

612 Grove Court Maitland, FL 32751

Mailing Address

612 Grove Court Maitland, FL 32751

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2/1/98

4. FEI Number

59-3490531

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Election Campaign Financing

□

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

□ Yes

X No

2. Principal Place of Business

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Richard D. Pappas 612 Grove Court Maitland, FL 32751

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 607.0508, 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, 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

Table with columns for Officer/Director information: Title, Name, Street Address, City-ST-ZIP. Includes entries for Richard D. Pappas, Ronald E Thurston, and Laurie A. Collado.

Table with columns for Additions/Changes to Officers and Directors: 1.1 Title, 1.2 Name, 1.3 Street Address, 1.4 City-ST-ZIP, etc.

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

Signature and typed or printed name of officer or director

Handwritten signatures and dates: 4/17/99, 4/17/99, 786-3933

CR2E034 (1/98)