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2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000053467

1. Entity Name

SUNBURST PROPERTIES, INC.

FILED Jan 25, 2000 8:00 am Secretary of State 01-25-2000 90116 007 ***150.00

2. Principal Place of Business Sulte, Apt. #, etc. Sulte, Apt. #, etc. City & State Country Zip Country Zip Country Zip Country S. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name LAMB, MARION D III 1972 RAYMOND DIEHL RD TALLAHASSEE FL 32308 City Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signavue, lipsed or printed name of registered agent and title [f applicable. (NOTE Registered Agent aignnature required when releasting) Date 9. This corporation is eligible to satisfy its Intangible Tax fitting requirement and elects to do so. (See criteria on back) Applied For Non Agent agent and agent and agent and title [f applicable. (NOTE Registered Agent aignnature required when releasting) Date \$5.00 May Be Address (P.O. Box Number State Of Country) Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					01 23 2000 30110 0	07 130.00
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1972 RAYMOND DIEHL RD TALLAHASSEE FL 32308 City FL Zip Code City				Name		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE SIGNATURE				Street Add	dress (P.O. Box Number is Not Acceptable)	
B. The above named entity submits this statement for the purpose of changing its registered ciffice or registered agent, or both, in the State of Florida. Signulum hysec or printed name of registered agent and feel of anoticoble. (POTE Registered Agent signature required when waitstrong) DATE	TALLAHASSEE FL 32308			ļ		
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13. 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						
	13. I hereby	certify that the information supplied with t	his filing does not qualify for	the exemption stated	in Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the information

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR