05-10-1999 90035 038 \*\*\*150.00

## 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

## DOCUMENT # P98000077072

1. Corporation Name

SUNDANCE COMMERCIAL REALTY INC

SUNDAIN	ICE COMMENCIAL REALTS,	IIIO.											
Principal Plac	e of Business	М	ailing Address						- 4:4:4:18:1				
24520 PRODUC	TION CIRCLE	245	520 PRODUCTION CIRC	LE									
SUITE 3 SUITE 3									DO NOT 18	ØITE IN T⊔	IS SDACE		
BONITA SPRINGS FL 34135 BONITA SPRINGS FL 34135								DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified					
							ļ	09/04/1998					ļ
0.0:	1 ( D	30	, Mailing Address					4. FEI Number				Appli	ed For
								.59_	3532	055		• • •	Applicable
21			Suite, Apt. #, etc.								\$8.7	5 Add	ditional
			27					5. Certifcate of S	tatus Desired		Fee	Requ	iired
City & Stat	te	1	City & State					6. Election Camp	aign Financir	 ng	\$5.0	00 м	ау Ве
23			28					Trust Fund Co	_	" D		ed to	
Zip Country			Zip Country					8. This corporation	on owes the o	urrent year	Intangible		
24	25	29		30				Personal Prop	erty Tax.		Yes		]No
	9. Name and Address of Current	Regis	stered Agent					10. Name and Ac	idress of Ne	w Registere	d Agent		
					81	Name							ļ
BOKMULLER, TIM 24520 PRODUCTION CIRCLE					82	2 Street Addres		s (P.O. Box Number	er is Not Acce	eptable)	<del></del>		
SUITE 3					83								
BON	IITA SPRINGS FL 34135				84	City					. 85 Z	ip Co	de
	to the provisions of Sections 607.0502				1					F	L	•	
SIGNATURE	Signature, typed or printed name of registered agent			TE: Registered	Ager	nt signature r	equired w	when reinstating)  ADDITIONS/C	ANGES TO	DATE	AND DIREC	CTOR	S IN 12
12.	D-PRESIDENT-			1.1 Π	—- П Е			ADDITIONOTO	IANOLO 10	0,1102.10	Chan		Addition
TITLE		<i>)</i> ~ L	A-301CERCIT	1.2 N				_	$\supset$			_	
NAME	BOKMULLER, TIM 6094 FOREST VILLAS CIRCLE			I _		T ADDRESS							
STREET ADDRESS	FORT MYERS FL 33908					T-ZIP							
CITY-ST-ZIP	D VICE PRESIDE	-177	- DELETE	2.1 TI	_	11-23F					☐ Chan	ıge	Addition
NAME	SANDRA C.GAIL	י היי נממו	oe F	2.2 N									•
1		_		. E		TADDRESS	->	•					
STREET ADDRESS	Para A Sarah	Z	634/34	1		ST-ZIP							
CITY-ST-ZIP TITLE	BONITA SPRINGS  D- SECRETARY  DOROTAY T. KO.	,	DELETE	3.1 Ti							Chan	ige	Addition
NAME	Doe oth T. Ke	40	H-	3.2 N	AME		_						<b>/</b> \
STREET ADDRESS	4725 TAhiri	DI	e.	3.3 \$	TREE	T ADORESS							
CITY-ST-ZIP	BOW 170 500 10/65			34.0	ary-9	ST-ZIP							
TITLE	SCN / CIT SPRINGES	☐ DELETE 4.1		4.1 Π	-						Char	nge	Addition
NAME				4.21	IAME								
STREET ADORESS						T ADDRESS							
CITY-ST-ZIP						T-ZIP							
TITLE			☐ DELETE	5.1 Ti							☐ Char	nge	☐ Addition
NAME	1			EON	AME								
	1			3.2 IV	- 041L								
STREET ADDRESS				4		T ADORESS							
STREET ADDRESS				5.3 S	TREE	T ADORESS							
STREET ADDRESS CITY-ST-ZIP			☐ DELETÉ	5.3 S	TREE						_ Char	nge	Addition

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 change or or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP ...