1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000077107

Country

9. Name and Address of Current Registered Agent

25

. Corporation Name

SUNSET HARBOR INVESTMENTS, INC.

Principal Place of Busines
512 BRAGINTON ST.
CLEARWATER FL 33756

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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Zip

Mailing Address

512 BRAGINTON ST. CLEARWATER FL 33756

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90135 015 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/04/1998 4. FEI Number Applied For <u>59-3530874</u> Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible □No Personal Property Tax. 10. Name and Address of New Registered Agent BRAGINTON CLEARWATER CLEARWATER ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change

GRIFFIN, DAVID Street Address (P.O. Box Number is Not Acceptable)

5/2 ReAGINTON 82 565 S. DUNCAN AVE. **CLEARWATER FL 33756** 84 City 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 am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. WAYNE (NOTE: PA-COGSWELL, PRES SIGNATURE OFFICERS AND DIRECTORS 12 13. PRESIDENT/D ☐ DELETE 1.1 TITLE TITLE WAYNE COGSWELL 1.2 NAME NAME 512 BRAGINTON 1.3 STREET ADDRESS STREET ADDRESS CLEARWATER, FC. 1.4 CITY-ST-ZIP CITY-ST-ZIF Addition ☐ DELETE 21 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.'4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

Country

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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, and all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

COLSWELL, PRES Z/18/99 727-559-8644

CR2E034 (11/98)