Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CGRPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000082760

Country

9. Name and Address of Current Registered Agent

25

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

SUNSHINE COMPUTER CONSULTING, INC.

Principal Place of Business	Mailing Address
6331 5TH STREET, CIRCLE EAST BRADENTON FL	6331 5TH STREET CIRCLE EAST BRADENTON FL
3	

26

27

28

29

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

## **FILED** Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90067 033 \*\*\*150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

09/22/1998 4, FEI Number

65-08 65895

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

			81	Name	<u> </u>			j		
HATTAWAY, HAROLD E JR				1401116						
6331 5TH STREET CIRCLE EAST			82	Street Address (P.O. Box Number is Not Acceptable)						
	DENTON FL		83			<del></del>				
Orea	J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		100							
			84	City		FL.	85 Zip C	ode		
44 - D	1 the security of Sections 607 0502 and 607 1508 El	orida Statutes the	ahove	-named co	moration submits this statemen	nt for the purpose of	changing its r	registered		
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.										
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.			<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE		DELETE 1.1	TITLE				Change	Addition		
NAME	HATTAWAY, HAROLD E JR	1.2	NAME					1		
STREET ADDRESS	6331 5TH ST. CIR. E.	1.3	STREET	ADDRESS				}		
CITY-ST-ZIP	BRADENTON FL	1.4	CITY-S	r-ZIP						
TITLE		DELETE 2.1	TITLE	İ			☐ Change	Addition		
NAME	HATTAWAY, SUSAN M	2.2	NAME							
STREET ADDRESS	6331 5TH ST. CIR. E.	2.3	STREET	ADDRESS						
CITY-ST-ZIP	BRADENTON FL	2.4	CITY-S	T-ZIP-						
TITLE		DELETE 3.1	TITLE				☐ Change	Addition		
NAME	HATTAWAY, PHILLIP R	3.2	NAME							
STREET ADDRESS	6331 5TH ST. CIR. E.	3.3	STREET	ADDRESS						
CITY-ST-ZIP	BRADENTON FL	3.4	CITY-S	T-ZIP						
TITLE	V	DELETE 4.1	TITLE				Change	☐ Addition		
NAME	HATTAWAY, JOHN	4.3	NAME	1				1		
STREET ADDRESS	6331 5TH ST. CIR. E.	4.3	STREET	ADDRESS						
CITY-ST-ZIP	BRADENTON FL	4.4	CITY-S	r-ZIP						
TILE	ST	DELETE 5.1	TITLE				Change	Addition		
NAME	FRANKART, LESLYE A	5.2	NAME							
STREET ADDRESS	6331 5TH ST. CIR. E.	5.3	STREET	ADDRESS				<u> </u>		
CITY-ST-ZIP	BRADENTON FL		CITY-S	f-ZIP						
TITLE	, <u> </u>	J D C C C C C C C C C C C C C C C C C C	TITLE				☐ Change	☐ Addition		
NAME		6.2	NAME				-			
STREET ADDRESS		6.3	STREET	ADDRESS						
CITY-ST-ZIP			CITY-S		·					
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 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 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 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 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 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 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 indicated on this annual report of the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made										
officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Plonda Statutes, and that my hame appears in										
Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: HATTAWAY JE 941-758-534										
SIGNATURE:   SIGNATURE:   SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Dayling Phone #										

Country

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