

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000087588

Entity Name: SUNSEEKER FLORIDA, INC.

FILED  
Apr 20, 2004  
Secretary of State

## Current Principal Place of Business:

750 S FEDERAL HIGHWAY  
POMPANO BEACH, FL 33062 US

## New Principal Place of Business:

## Current Mailing Address:

200 E LAS OLAS BLVD.  
STE 1900  
FORT LAUDERDALE, FL 33301 US

## New Mailing Address:

FEI Number: 65-1002439      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRINKLEY, W. MICHAEL ESQ  
200 E LAS OLAS BLVD, SUITE 1900  
FT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HATCHARD, MARK  
Address: 750 S. FEDERAL HIGHWAY  
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete  
Name: ROBERTSON, SEAN  
Address: 750 S FEDERAL HIGHWAY  
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: D ( ) Delete  
Name: FACKRELL, ROBERT  
Address: 750 S FEDERAL HIGHWAY  
City-St-Zip: POMPANO BEACH, FL 33062 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK HATCHARD

P

04/20/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date