**PROFIT CORPORATION** ANNUAL REPORT

SIGNATURE: \_



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 27, 1999 8:00 am Secretary of State 04-27-1999 90187 012 \*\*\*150.00

	1999								4					
DOCU 1. Corpora io	MENT # on Name	P98000	09	3606										
SUNFIRS	ST FINANCIA	L, INC.												
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Principal Plac	e of Business		М	lailing Address					"		1111 69117 60110	12/45 (11)	•••••	
50 N. LAURA STREET #3100 50 N. LAURA STREET #3100														
JACKSONVIL_E	FL 32202		JA	CKSONVILLE FL 32202						DO NOT WR	ITE IN TH S	SPACE		
									3. Date In	corporated or Qualifed				7
									11/04	/1998				]
2. Principal Place of Business			2a	2a. Mailing Address					4. FEI Nu				plied For	
21			26										Applicable	4
Suite, Apt.	#, etc.		T	Suite, Apt. #, etc.					5. Certifo	nte of Status Desired		\$8.75	Additional ecuired	
22			27	0: 20:1						· <del></del>				4
City & Stat	te			City & State						Campaign Financing und Contribution	ڪھھ 🕒 🖘	\$5.00 Added	May Be	• <del></del>
23 Zip	<del></del>	Country	28	Zip	Cou	intry				rporation owes the cur	rent year in			1
24	Country	29			30				al Property Tax.	on your	Yes	[]No		
24	9. Name and	Address of Curre		stered Agent						and Address of New	Registered	Agent		]
						81	Name							
		ACDONALD & W	ELLS, 1	P.A.		82	Street A	c dre	ss (P.O. Rox	Number is Not Accept	able)			1
50 N. LAURA STREET #3100						"	Suder	icuic.	33 (17.0. 150)	- Transaria in the record				_
JACH	ksonville fl	32202				83								
						84	City					85 Zip (	C-xde	┪
											<u>FL</u>	.		4
11. Pursuant	to the provisions	of Sections 607.05	02 and 6	307.1508, Florida Stat	ites, the a	bove	-named o	crpo	ration submi	s this statement for the	purpose of of the appoi	changing its	registered a stered	
agent, la	registered agent, am familiar with, a	or bon, in the State not accept the oblig	ations of	, Section 607.0505, F	ixida Stat	ules.		E-CHO!	ro books or v	irectors. I hereby acce	pr and oppos		•	
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	Signature, typed or pri	med na ne of registered ag			13.	Agen	t signature re	qu ired s	when reinstaking)	NS/CHANGES TO O	DATE EICERS AN	ID DIRECTO	F:S IN 12	CR2E034 (11/98)
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CITY-ST-ZIP	cedify that the infi	ormation supplied u	vith this f	filing does not qualify t	us the eve	motio	no stated	in Se	ction 119.07	(3)(i), Florida Statutes.	I further cer	tify that the i	n ormation	_
indication	on this annual re	port or supplement moration or the rec	ai annua	report is true and act trustee empowered to with an address, with	execute ti	u ioi IIS re	port as re	HIUITE	shall have thed by Chapte	e same legal effect as r 607, Florida Statutes	f made und ; and that in	er oath; that ty name app	i am an Bars in	

William Hummers

4/10/4