2001 UNIFORM BUSINESS REPORT (UBR)

May 17, 2001 8:00 am Secretary of State DOCMMENT # P99000087618 05-17-2001 91362 034 ***150.00 SUNSCAPE MANAGEMENT, INC. Principal Place of Business Mailing Address 1318 LAFAYETTE STREET 1318 LAFAYETTE STREET 101000 CAPE CORAL FL 33904 CAPE CORAL FL 33904 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0953225 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HILL, THOMAS W Street Address (P.O. Box Number is Not Acceptable) 1318 LAFAYETTE ST CAPE CORAL FL 33904 Zip Code City 8. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS **PSTD** ☐ Change ☐ Addition TITLE ☐ Delete TITLE KNOLL, KARL NAME NAME 1318 LAFAYETTE STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CAPE CORAL FL 33904 ___ Addition ☐ Change AS ☐ Delete TITLE TITLE HILL THOMAS W NAME STREET ADDRESS 1318 LAFAYETTE ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF CAPE CORAL FL 33904 Addition . Change TITLE ☐ Delete TITLE NAME. --NAME -STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED



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May 10, 2001

Division of Corporations
Annual Reports Filings/Reinstatement Section
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Sunscape Management, Inc

Dear Sirs:

Please accept this late filed Annual Report. We also request that you waive the late filing fees and penalties. We are enclosing the amount of \$150.00 for the Annual Report fee.

We had attempted to secure the funds for this purpose from the shareholder/president; however, that gentleman is in travel status in Europe and we have not been able to contact him. Accordingly, we are advancing the funds for this purpose, and we are asking under the circumstances that you waive the penalty and accept the \$150.00 filing fee.

Thank you.

Sincerely,

Thomas W. Hill

Hill & Company, CPA, P.A.

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Enclosures