2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#

P99000099393

1. Entity Name



FILED Apr 14, 2003 8:00 am Secretary of State

04-14-2003 90755 011 ***150.00

TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS	SUNVEST REALTY, INC.							
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Zip Country Zip Country 5. Certificate of Status Desired S8.75 Additional Feb Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable) Street Addr	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			· □ CHECK HERE IF M	IAKING CHANGES	3
SPURLOCK, DONALD J 250 S SYKES CREEK DR STEED 7-006 8. The above named entity submits jhis statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and	City & Star	te	City & State			4. FEI Number 58-2535562	⊢	
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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 powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if s, with all other like empowered. indicated on this report or supplemental report the corporation or the receiver or trustee changed, or on an attachment with an address.

SIGNATURE: