

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # **S79277** (7)
SUNUNU MANAGEMENT, INC.

Principal Office of Registered Agent: **1302 PELICAN LN. GULFSTREAM FL 33483**
Mailing Address: **1302 PELICAN LN. GULFSTREAM FL 33483**

Do not write in this space

3. Date Incorporated or Qualified: **09/06/1991**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **65-0286856**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation is qualified for incorporation under the Florida Statutes: Yes No

2. Principal Office of Registered Agent: **21**
2a. Mailing Address: **26**
22. State App. # etc: **27**
23. City & State: **28**
24. **25** **29** **30**

9. Name and Address of Current Registered Agent
**SUNUNU, CHARLES
1302 PELICAN LN.
GULFSTREAM FL 33483**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (if P.O. Box Number is Not Acceptable)
83.
84. City
85. State: **FL**

11. Pursuant to the provisions of Sections 607.01(2)(b) and 607.01(2)(c) Florida Statutes, the above named corporation hereby makes 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, thereby accepting the appointment as registered agent. I am familiar with and accept the qualifications of the new agent as provided by Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

01. TITLE	01. NAME	01. STREET ADDRESS	01. CITY
	PD SUNUNU, CHARLES	1302 PELICAN LN. GULFSTREAM FL	
02. TITLE	02. NAME	02. STREET ADDRESS	02. CITY
03. TITLE	03. NAME	03. STREET ADDRESS	03. CITY
04. TITLE	04. NAME	04. STREET ADDRESS	04. CITY
05. TITLE	05. NAME	05. STREET ADDRESS	05. CITY
06. TITLE	06. NAME	06. STREET ADDRESS	06. CITY

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

07. TITLE	07. NAME	07. STREET ADDRESS	07. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
08. TITLE	08. NAME	08. STREET ADDRESS	08. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
09. TITLE	09. NAME	09. STREET ADDRESS	09. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. TITLE	10. NAME	10. STREET ADDRESS	10. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. TITLE	11. NAME	11. STREET ADDRESS	11. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. TITLE	12. NAME	12. STREET ADDRESS	12. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.01(2)(c) Florida Statutes. I further certify that the information furnished 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 officer or director of the corporation or the trustee or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of the officers or directors of the corporation with an address.

SIGNATURE: *Charles Sununu* **Charles Sununu** 4/28/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR