

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

APPROVED AND FILED

COMM - 1 MAY 9 1995

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Tallahassee, Florida  
Secretary of State  
Tallahassee, Florida 32304

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

Principal Office Registered: **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 in Florida Statutes:  Yes  No

2. Principal Office (US State): **21 FL**  
2a. Mailing Address: **26 FL**  
22. State Apt. # etc: **27**  
23. City & State: **28**  
24. City & State: **25**  
29. City & State: **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 607.0105 and 607.0108, Florida Statutes, the above named corporation admits 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 affirming the appointment as registered agent. I am familiar with and accept the responsibility for the filing of this statement in Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

01. TITLE	PD
02. NAME	SUNUNU, CHARLES
03. STREET ADDRESS	1302 PELICAN LN.
04. CITY & STATE	GULFSTREAM FL
05. TITLE	
06. NAME	
07. STREET ADDRESS	
08. CITY & STATE	
09. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY & STATE	
21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	
23. STREET ADDRESS	
24. CITY & STATE	
25. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
26. NAME	
27. STREET ADDRESS	
28. CITY & STATE	
29. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
30. NAME	
31. STREET ADDRESS	
32. CITY & STATE	
33. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
34. NAME	
35. STREET ADDRESS	
36. CITY & STATE	

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 607.0105(1)(b), 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 execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report as a registered agent with an address.

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