

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

APPROVED AND FILED

COMM - 1 - 11 9: 57
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 under the Florida Statutes: Yes No

2. Principal Office (US State): **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 607.0105 and 607.0108, Florida Statutes, the above named corporation admits this statement for the purpose of changing its registered office or registered agent, as both in the State of Florida, and for change was authorized by the corporation's board of directors, thereby accepting the appointment as registered agent, in accordance with the provisions of Sections 607.0105 and 607.0108, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

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

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

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

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 607.0105(1)(b) Florida Statutes. I further certify that the information is correct on the annual report or supplemental annual report of this and all other entities 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 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