

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # V09768 (5)

1. Corporation Name

SUNQUEST TREES INC.



Principal Place of Business

8892 156 COURT SO.
DELRAY BEACH, FL 33446

Mailing Address

8892 156 COURT SO.
DELRAY BEACH, FL 33446

3. Date Incorporated or Qualified

01/29/1992

3a. Date of Last Report

04/25/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. F.E.T. Number

65-0305053

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THORNSBURY, KEN
8892 156 COURT SO.
DELRAY BEACH FL 33446

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME THORNSBURY, KEN
STREET ADDRESS 8892-156TH COURT SOUTH
CITY-ST-ZIP DELRAY BCH FL

1 TITLE ☐ Change ☐ Addition
2 NAME
3 STREET ADDRESS
4 CITY-ST-ZIP

TITLE ST ☐ DELETE
NAME JACOB, GREG
STREET ADDRESS 8892 156TH CT S
CITY-ST-ZIP DELRAY BEACH FL

1 TITLE ☐ Change ☐ Addition
2 NAME
3 STREET ADDRESS
4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1 TITLE ☐ Change ☐ Addition
2 NAME
3 STREET ADDRESS
4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1 TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

1 TITLE ☐ Change ☐ Addition
2 NAME
3 STREET ADDRESS
4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Greg Jacobo 4-29-96 (407) 499-5168

CR2E034 (12/96)