

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000082783

**Entity Name:** SUNBELT COMMUNITIES, INC.

**Current Principal Place of Business:**

2225 W. HOLDEN AVENUE  
ORLANDO, FL 32839

**Current Mailing Address:**

SUNBELT COMMUNITIES, INC.  
P.O. BOX 720395  
ORLANDO, FL 32872 US

**FEI Number:** 59-3345626

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

THE LAW OFFICES OF JOHN L. DI MASI  
801 N. ORANGE AVE  
STE 500  
ORLANDO, FL 32801 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name GRAVES, LEWIS H  
Address 3960-535 SOUTHPOINTE DR  
City-State-Zip: ORLANDO FL 32822

Title SD  
Name GRAVES, KATHLEEN M  
Address 3960-535 SOUTHPOINTE DR  
City-State-Zip: ORLANDO FL 32822

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LEWIS H. GRAVES

**PRESIDENT**

**02/02/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date