

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718391

FILED  
Mar 10, 2006  
Secretary of State

**Entity Name:** SUNSHINE TOWERS APARTMENT RESIDENCES ASSOCIATION, INC.

**Current Principal Place of Business:**

4151 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685 US

**New Principal Place of Business:**

**Current Mailing Address:**

4151 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685

**New Mailing Address:**

FEI Number: 59-1727900      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

REARDON, MAUREEN C  
4151 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685 US

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

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

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: CHARLEBOIS, LOUIS  
Address: 1243 S GREENWOOD AVE, #A-403  
City-St-Zip: CLEARWATER, FL

Title: PD ( ) Delete  
Name: BERRY, TERRY  
Address: 298 QUANE AVE.  
City-St-Zip: SPRING HILL, FL 34609

Title: D ( ) Delete  
Name: AMMERMAN, DAWAIN  
Address: 1243 S. MLK AVE. #C205  
City-St-Zip: TORONTO, ONTARIO, CA M2H 3N3

Title: TD ( ) Delete  
Name: AMORE, DARYL  
Address: 1243 S. MLK JR., AVE. A401  
City-St-Zip: CLEARWATER, FL 33756

Title: SD ( ) Delete  
Name: EWLAD, JOANNE  
Address: 1243 S. MLK JR. AVE. A404  
City-St-Zip: CLEARWATER, FL 33765

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: RUSSEL, JOSEPH  
Address: 1243 S. MLK AVE. #B103  
City-St-Zip: SPRING HILL, FL 34609

Title: TD (X) Change ( ) Addition  
Name: AMMERMAN, DAWAIN  
Address: 1243 S. MLK AVE. #C205  
City-St-Zip: TORONTO, ONTARIO, CA M2H 3N3

Title: PD (X) Change ( ) Addition  
Name: AMORE, DARYL  
Address: 1243 S. MLK JR., AVE. A401  
City-St-Zip: CLEARWATER, FL 33756

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARYL AMORE

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PD

03/10/2006

\_\_\_\_\_ Date