2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**



FILED Feb 07, 2007 8:00 am Secretary of State 02-07-2007 90036 048 ****61.25

DOCUMENT #744949 1. Entity Name

SUNSET PLAZA EAST CONDOMINIUM ASSOCIATION, INC.												
680 71ST. AVE. 250 1				g Address 104TH AVENUE SURE ISLAND, FL	33706	,		40010		 	BIBKI BIBKI BIBKI BI	CINER EN NOTA
2. Principal Place of Business - No P.O. Box # 3. Mai			ailing Address									
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.				01162007	Chg-NP	CR2E	037 (12/06)	
City & State		Cit	y & State	·		59-1873314 Not Applie			opplied For lot Applicable			
Zip	Country Zip				untry	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required						
6. Name and Address of Current Registered							7. Name and Address of New Registered Agent					
LAMONT, SUE 250 104TH AVENUE TREASURE ISLAND, FL 33706					Name Street Address (P.O. Box Number is Not Acceptable)							
		,										
	-					City				F	L Zip Coo	de
	tions of regist	y submits this statement for lered agent.	. ,			ed office or regional of the office or region of the office of the offic	,	J	n, in the State of I	Florida. I ar		, and accept
Filing Fee is \$61.25 Due by May 1, 2007												
				9. Election Can Trust Fund C		· -	\$	5.00 May Bodded to Fees	e Fi		ck payable artment of §	
10.	Due by N		RECTORS	Trust Fund C		· -		5.00 May Bodded to Fees	FINGES TO OFFIC	orida Dep	artment of S	State
10.	PD PD	OFFICERS AND DI	RECTORS		11.	ion. E		5.00 May Bodded to Fees	FI	orida Dep	artment of S	State N 10
10.	PD BRAYMO	OFFICERS AND DI	RECTORS	Trust Fund C	11.	E E		5.00 May Bodded to Fees	FI	orida Dep	artment of S	State N 10
10. TITLE NAME STREET ADDRESS	PD BRAYMO	OFFICERS AND DIE RE, KEN ENCAIRN	RECTORS	Trust Fund C	11. TITLE NAM STRE	E E E E E E E E E E E E E E E E E E E		5.00 May Bodded to Fees	FI	orida Dep	artment of S	State N 10
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP	PD BRAYMO RR #1 GL ONTARIO	OFFICERS AND DI	RECTORS	Trust Fund C	11. TITLE NAM STRE	E EEE ADDRESSST-ZIP		5.00 May Bodded to Fees	FI	orida Dep	DIRECTORS I	State N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD BRAYMO RR #1 GL ONTARIO	OFFICERS AND DII RE, KEN .ENCAIRN), CANADA, 10m 1k0	RECTORS	Trust Fund C	11. TITLE NAM STRE CITY	E E E E E E E E E E E E E E E E E E E		5.00 May Bodded to Fees	FI	orida Dep	artment of S	State N 10
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD BRAYMO RR #1 GL ONTARIO VD TROTTIE 455 10 R/	OFFICERS AND DII RE, KEN .ENCAIRN), CANADA, 10m 1k0		Trust Fund C	11. TITU: NAM STRE CITY TITL: NAM STRE	E E E E E E E E E E E E E E E E E E E		5.00 May Bodded to Fees	FI	orida Dep	DIRECTORS I	State N 10 Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attainment with an address, with all other like empowered.

SIGNATURE: