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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 748712

1. Corporation Name

SUNSET GARDENS CONDOMINIUM, INC.

102806 - 90077 - 14

Principal Place of Business

544 BELLTOWER AVE
DELTONA FL 32725
US

Mailing Address

544 BELLTOWER AVE
DELTONA FL 32725
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
08/30/1979

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-2144700

Applied For
Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip 25 Country

28 Zip 29 Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DYE, GEORGE
544 BELLTOWER AVE
DELTONA FL 32725

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *George Dye*
Signature, typed or printed name of registered agent and title if applicable.

GEORGE DYE

1-12-99
DATE

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME EGBERT, JOHN
STREET ADDRESS 553 BELLTOWER AVE
CITY-ST-ZIP DELTONA FL
 DELETE

1.1 TITLE P
1.2 NAME ROBERT, JONBERWARD
1.3 STREET ADDRESS 574 BELLTOWER AVE
1.4 CITY-ST-ZIP DELTONA FL. 32725
 Change Addition

TITLE D
NAME THOMPSON, LORRAINE
STREET ADDRESS 546 BELLTOWER AVE
CITY-ST-ZIP DELTONA FL
 DELETE

2.1 TITLE D
2.2 NAME JOSEPH HANOLSON
2.3 STREET ADDRESS 542 BELLTOWER AVE
2.4 CITY-ST-ZIP DELTONA, FL. 32725
 Change Addition

TITLE D
NAME EGBERT, JOHN
STREET ADDRESS 553 BELLTOWER AVE.
CITY-ST-ZIP DELTONA FL
 DELETE

3.1 TITLE D
3.2 NAME LORRAINE THOMPSON
3.3 STREET ADDRESS 546 BELLTOWER AVE
3.4 CITY-ST-ZIP DELTONA, FL. 32725
 Change Addition

TITLE D
NAME HUYSMAN, WILLIAM G
STREET ADDRESS 564 BELLTOWER AVE
CITY-ST-ZIP DELTONA FL
 DELETE

4.1 TITLE D
4.2 NAME BETSY ECKER
4.3 STREET ADDRESS 556 BELLTOWER AVE.
4.4 CITY-ST-ZIP DELTONA, FL. 32725
 Change Addition

TITLE D
NAME JONGEWARD, ROBERT
STREET ADDRESS 574 BELLTOWER AVE
CITY-ST-ZIP DELTONA FL
 DELETE

5.1 TITLE D
5.2 NAME WILLIAM HUYSMAN
5.3 STREET ADDRESS 564 BELLTOWER AVE.
5.4 CITY-ST-ZIP DELTONA FL. 32725
 Change Addition

TITLE TD
NAME DYE, GEORGE
STREET ADDRESS 541 BELLTOWER AVE
CITY-ST-ZIP DELTONA, FL 00000
 DELETE

6.1 TITLE TD
6.2 NAME GEORGE DYE
6.3 STREET ADDRESS 544 BELLTOWER AVE
6.4 CITY-ST-ZIP DELTONA, FL. 32725
 Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-99 407-574-7585
Date Daytime Phone #

CR2E037 (11/98)