


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # 756130 1. Entity Name SUNRAKER WEST ASSOCIATION, INC.	
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Principal Place of Business C/O GRAYMAR ENTERPRISES 350-2 GULF BLVD. INDIAN ROCKS BEACH, FL 33785 US	Mailing Address C/O GRAYMAR ENTERPRISES 350-2 GULF BLVD. INDIAN ROCKS BEACH, FL 33785 US
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04272005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2107613	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

CHRISTNER, MARGARET  
 350-2 GULF BLVD  
 INDIAN ROCKS BEACH, FL 33785

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CHRISTNER MARGARET A. 8540 140TH ST. N. SEMINOLE, FL 34646
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COSSOTA, FRANK F 15603 KINGS PKWY TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, REX E 3440 VALLEY RANCH DR LUTZ, FL 33549
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00000350598  
05/02/05-80110-024 61.25

12. 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 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 attachment with an address, with all other like empowered.

SIGNATURE: Margaret Christner Date: 4-26-05 Daytime Phone #: 727-596-8222  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR