


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # 763504 1. Entity Name SUNFLOWER MARGATE ASSOCIATION, INC.	
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Principal Place of Business POB OX 772488 CORAL SPRINGS, FL 33077	Mailing Address POB OX 772488 CORAL SPRINGS, FL 33077
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01182007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0034273	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CHAMBERLAIN, DAVID
7709 NW 20TH STREET
MARGATE, FL 33063

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

Filing Fee is \$61.25
Due by May 1, 2007

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	S ROBINSON, DEANNE 7610 NW 18 CT MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GOONAN, PATRICK 7807 SUNFLOWER DR MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARON, JOAN 7703 SUNFLOWER DR MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POLICELLA, JOHN 1801 NW 80TH AVE MARGATE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROND, NICKY 1910 NW 79TH TERRACE MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDIDGE, FRANK 7808 SUNFLOWER DRIVE MARGATE, FL 33063

U00000687659
04/10/07-80049-003 61.25

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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 attachment with an address, with all other like empowered.

Debra A. Ch... 3/14/07 954 968-0287