2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765061

Entity Name: SUNRISE OWNERS GROUP, INC.

FILED Jaņ 13, 2<u>00</u>9 Secretary of State

4962 N PALM AVENUE US WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

P.O. BOX 677307 ORLANDO, FL 328677307 US

FEI Number: 59-2278917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FRASCA, JOSEPH C/O PREFERRED COMMUNITY MGT. 4962 N PALM AVENUE WINTER PARK, FL 32792 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BROWN, DEBORAH JABLONSKI, ANTOINETTE Name: Name: 1280 ANDES DR. Address: 1385 PONCE DE LEON BLVD Address: WINTER SPRINGS, FL 32708 City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip:

Title: () Delete Title: () Change () Addition

MERCERD, JOSE A Name: Name: Address: 1397 SANTIAGO COURT Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip:

Title: () Delete Title: () Change () Addition

BOESEN, MONICA Name: Name: 1388 PONCE DE LEON BLVD Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip:

() Delete Title: VD Title: (X) Change () Addition

JABLONSKI, ANTOINETTE Name: Name: BATISTA, GABRIELLA 1385 PONCE DE LEON 1395 LA POLOMA CIR Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete Title: (X) Change () Addition

ABBOTT, CHERYL ABBOTT, CHERYL Name: Name: 1126 FRANCISCO WAY 1126 FRANCISCO WAY Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete Title: (X) Change () Addition

TATUM, DAVE WATTS, JOHN Name: Name: Address: 1364 ORTEGA STREET Address: 1050 LAS CRUCES DR WINTER SPRINGS, FL 32708 WINTER SPRINGS, FL 32708 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOSEPH FRASCA MGR. 01/13/2009

Electronic Signature of Signing Officer or Director

Date