2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N01000000234

Entity Name: SUNRISE CITY COMMUNITY HOUSING DEVELOPMENT ORGANIZATION INC.

Current Principal Place of Business:

1513 NORTH 23RD STREET
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

1513 NORTH 23RD ST.
FORT PIERCE, FL 34950

New Mailing Address:

FEI Number: 65-1065285 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PHILPART, TOBY T REV
1931 ROYAL PALM DRIVE
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GIBSON, KAYE
Address: 3214 HIBISCUS AVENUE
City-St-Zip: FORT PIERCE, FL 34947

Title: D ( ) Delete
Name: BURNS, ELIZABETH
Address: 422 N 22 STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: ED ( ) Delete
Name: WATSON, TRINA M
Address: 3214 HIBISCUS AVE.
City-St-Zip: FORT PIERCE, FL 34947

Title: DP ( ) Delete
Name: PHILPART, TOBY T REV
Address: 1931 ROYAL PALM DR
City-St-Zip: FORT PIERCE, FL 34982

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DVP ( ) Change (X) Addition
Name: WALLER, RODERICK
Address: 1274 SW CEDAR COVE
City-St-Zip: PT ST LUCIE, FL 34986

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: TOBY T. PHILPART DP 04/30/2008

Electronic Signature of Signing Officer or Director — Date