2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State
03-22-2004 90295 031 ****70.00

DOCUMENT # N02463

1. Entity Name

SUNNYSIDE RETIREMENT INCORPORATED

Principal Place of Business	Mailing Address
5201 BAHIA VISTA SARASOTA FL 34232-2615	5201 BAHIA VISTA SARASOTA FL 34232-2615

MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2562598 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, DAVID RAY
5201 BAHIA VISTA
SARASOTA FL 34232

7. Name and Address of New Registered Agent

Name: Patti A. Bos
Street Address (P.O. Box Number is Not Acceptable): 5201 Bahia Vista Street
City: Sarasota **FL** Zip Code: 34232

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: Patti A. Bos — Acting Executive Director — 3/15/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KORNHAUS, CHERYL 560 COMMONWEALTH PLACE SARASOTA FL 34242	☐ Delete	D, VP Lee, H. Greg 2014 Fourth St. Sarasota, FL 34237	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, DANNY 1465 FOXCREEK DRIVE SARASOTA FL 34240	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT DENLINGER, GLEN 4041 BAHIA VISTA STREET SARASOTA FL 34232	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARRIS, WADE 1972 BARBER RD SARASOTA FL 34240	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MAST, ALLEN 1001 N. WASHINGTON ST SARASOTA FL 34237	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHLABACH, NAOMI 5885 IBIS STREET SARASOTA FL 34241	☒ Delete		☐ Change ☐ Addition

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: Patti A. Bos, Patti A. Bos, Acting Executive Director — 3.15.04 — 941-371-2750
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #