2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 23, 2005 8:00 am Secretary of State DOCUMENT # N02463 1. Entity Name 03-23-2005 90225 001 ***280.00 SUNNYSIDE RETIREMENT INCORPORATED Principal Place of Business Mailing Address 5201 BAHIA VISTA SARASOTA FL 34232-2615 5201 BAHIA VISTA SARASOTA FL 34232-2615 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State Applied For City & State 4. FEI Number 59-2562598 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent David Ray Miller BOS, PATTI A Street Address (P.O. Box Number is Not Acceptable) 5201 BAHIA VISTA STREET 5201 Bahia Vista St SARASOTA FL 34232 Sarasota, FL 34232 City Zip Code 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. <u>3-18-05</u> Date SIGNATURE Signature, typed or printed name if registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Pavable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Defete TITLE Change Addition Secretary KORNHAUS, CHERYL NAME NAME Kornhaus, Cheryl 560 COMMONWEALTH PLACE STREET ADDRESS STREET ADDRESS 560 Commonwealth Place SARASOTA FL 34242 CITY-ST-ZIP CITY-ST-7IP Sarasota, FL 34242 TITLE ☐ Delete TITLE Change Addition Director LEE, H. GREG NAME NAME Harris, Wade 2014 FOURTH ST. STREET ADDRESS STREET ADDRESS 990 Whitaker Lane SARASOTA FL 34237 CITY-ST-ZIP CITY-ST-ZIP Sarasota, FL 34236 TITLE TIDE Delete Change 📮 Addition Director. DENLINGER, GLEN NAMĒ NAME Isaac, Hertha 4041 BAHIA VISTA STREET STREET ADDRESS STREET ADDRESS 7391 Eleanor Circle Sarasota, FL 34243 SARASOTA FL 34232 CITY-ST-ZIP CITY-ST-ZIP Sarasota, FL TITLE ☐ Delete TITLE Director HARRIS, WADE NAME NAME Schlabach, Naomi 1972 BARBER RD STREET ADDRESS STREET ADDRESS 5885 Ibis Street SARASOTA FL 34240 CITY-ST-ZIP CITY-ST-ZIP Sarasota, PL 34241 Addition TITLE ☐ Delete TITLE Change MAST, ALLEN Director NAME NAME 1001 N. WASHINGTON ST Yoder, Paul STREET ADDRESS STREET ADDRESS SARASOTA FL 34237 5609 Bahia Vista Street CITY-ST-7IP CITY-ST-ZIP Sarasota, FL 34232 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

OF SIGNING OFFICER OR DIRECTOR

FILED