

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004816

FILED
Mar 28, 2008
Secretary of State

Entity Name: SUNDOWNER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3 SEVENTH AVENUE
INDIAN ROCKS BEACH, FL 33785

New Principal Place of Business:

Current Mailing Address:

19534 GULF BLVD
202
INDIAN SHORES, FL 337853202

New Mailing Address:

FEI Number: 56-2365053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, WILLIAM F
19534 GULF BLVD
202
INDIAN SHORES, FL 33785 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: GORELICK, IRA
Address: 8910 NESBIT LAKES DRIVE
City-St-Zip: ALPHARETTA, GA 30022

Title: VD () Delete
Name: SPINA, FRANCIS A
Address: 341 PRAIRIE KNOLL DRIVE
City-St-Zip: NAPERVILLE, IL 60565 41

Title: PD () Delete
Name: TERRELL, DARCY
Address: 15832 NW 48TH PL
City-St-Zip: ALACHUA, FL 32615

Title: STD () Delete
Name: KNOX, BENJAMIN
Address: 913 ROUX STREET
City-St-Zip: PLANT CITY, FL 33565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: SPINA, FRANCIS A
Address: 341 PRAIRIE KNOLL DRIVE
City-St-Zip: NAPERVILLE, IL 60565 US

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

Title: STD (X) Change () Addition
Name: KNOX, BENJAMIN
Address: 3706 FUTCH ROAD
City-St-Zip: PLANT CITY, FL 33565

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: WILLIAM F SMITH

RA

03/28/2008

Electronic Signature of Signing Officer or Director

Date