FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 27 PM 4:15

DOCUMENT # N20067 (7)

1. Corporation Name
SUN VALLEY HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O JEROME WIENER 5580 SPRING LAKE TERRACE BOYNTON BCH FL 33437	C/O JEROME WIENER 5580 SPRING LAKE TERRACE BOYNTON BCH FL 33437

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/10/1987
3a. Date of Last Report: 02/22/1994
4. FEI Number: 59-2913606 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

WIENER, JEROME
5580 SPRING LAKE TERRACE
BOYNTON BCH FL 33437

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number Is Not Acceptable)
33
34 City FL 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	POPOLIZIO, ANITA	1.2 NAME	
STREET ADDRESS	9264 SUN POINTE DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	☐ Change ☐ Addition
NAME	LEVINE, GERALD	2.2 NAME	
STREET ADDRESS	9525 MAJESTIC WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BCH FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	VP DIR ☒ Change ☐ Addition
NAME	SULLIVAN, EUGENE	3.2 NAME	LOWELL HALPERN
STREET ADDRESS	9812 EL CLAIRE RANCH ROAD	3.3 STREET ADDRESS	9960 LAUREL GROVE DR.
CITY-ST-ZIP	BOYNTON BEACH FL	3.4 CITY-ST-ZIP	BOYNTON BEACH FL 33437
TITLE	T	4.1 TITLE	☐ Change ☐ Addition
NAME	WIENER, JEROME	4.2 NAME	
STREET ADDRESS	5580 SPRING LAKE TERRACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BCH FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	ADAMO, ANGELO	5.2 NAME	
STREET ADDRESS	9298 SUN POINT DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BCH FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	DIRECTOR - SOCIAL ☐ Change ☐ Addition
NAME	NULANZ, GEORGE	6.2 NAME	DOMINIC MANCINI
STREET ADDRESS	9208 SUN POINTE BLVD	6.3 STREET ADDRESS	9375 LAUREL GROVE DR
CITY-ST-ZIP	BOYNTON BEACH FL	6.4 CITY-ST-ZIP	BOYNTON BEACH, FL 33437

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerome Wiener JEROME WIENER 1/26/95 407-369-0413
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0040048