

2000 UNIFORM BUSINESS REPORT (UBR)

8/

FILED
Aug 29, 2000 8:00 am
Secretary of State

08-15-2000 90011 012 ****61.25

DOCUMENT # N24909

1. Entity Name

SUNSET BAY HOMEOWNERS ASSOCIATION, INC.

R

Principal Place of Business

Mailing Address

6010 DOWN PT. LANE
 WINDERMERE FL 34786
 US

6010 DOWN PT. LANE
 WINDERMERE FL 34786
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBITAILLE, HENRY
 6010 DOWN PT. LANE
 WINDERMERE FL 34786

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	ROGERS, RAY D	
STREET ADDRESS	4300 DOWN POINT LANE	
CITY-ST-ZIP	WINDERMERE FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	AARON, BONNIE	
STREET ADDRESS	4232 DOWN POINT LN	
CITY-ST-ZIP	WINDERMERE FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ROBITAILLE, HENRY	
STREET ADDRESS	6010 DOWN POINT LN	
CITY-ST-ZIP	WINDERMERE FL 34786	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BERMAN, BARRY	
STREET ADDRESS	5070 DOWN POINT LANE	
CITY-ST-ZIP	WINDERMERE FL	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	JOSEPH, GEORGE	
STREET ADDRESS	5055 DOWN POINT LANE	
CITY-ST-ZIP	WINDERMERE FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HELSEL, STEVE	
STREET ADDRESS	4243 DOWN POINT LANE	
CITY-ST-ZIP	WINDERMERE FL	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Joseph, George	
STREET ADDRESS	5055 Down Point Lane	
CITY-ST-ZIP	WINDERMERE FL 34786	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Berman, Barry	
STREET ADDRESS	5070 Down Point Ln	
CITY-ST-ZIP	WINDERMERE FL 34786	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Toomey, Tina	
STREET ADDRESS	5076 Sunset Ct.	
CITY-ST-ZIP	WINDERMERE FL 34786	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: *Henry Robitaille* **Henry Robitaille, Treasurer** 8-10-00 407.560.7369

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E037 (5/00)