

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 07, 2008  
Secretary of State

DOCUMENT# N95000000704

Entity Name: SUNRISE RESORT ON ST. PETE BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5445 GULF BLVD  
ST. PETE BEACH, FL 33706 US

**New Principal Place of Business:**

**Current Mailing Address:**

10681 GULF BLVD.  
207  
TREASURE ISLAND, FL 33706 US

**New Mailing Address:**

1135 PASADENA AVE. S  
225  
SOUTH PASADENA, FL 33707 US

FEI Number: 59-3300556

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LIBERTE MANAGEMENT  
10681 GULF BLVD., SUITE 207  
TREASURE ISLAND, FL 33706 US

**Name and Address of New Registered Agent:**

BLUESKY MANAGEMENT  
1135 PASADENA AVE. S.  
225  
SOUTH PASADENA, FL 33707 US

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: DANIEL A. BOLINO

02/07/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: JOHN, THOMAS  
Address: 53 CHARLCOMBE RISE PORTISHEAD  
City-St-Zip: N. SOMERSET ENGLAND, UK B5208ND UK

Title: T ( ) Delete  
Name: CAMPBELL, JOHN  
Address: 277 55TH AVE  
City-St-Zip: ST. PETE BEACH, FL 33706 US

Title: SD ( ) Delete  
Name: CRAIG, ALLEN  
Address: 2030 BAY POINTE DR  
City-St-Zip: HIXSON, TN 373433189 US

Title: D ( ) Delete  
Name: JENIO, JOSEPH  
Address: 12258 FENTON ROAD  
City-St-Zip: FENTON, MI 48430 US

Title: D ( ) Delete  
Name: GLOSSOP, DAVE  
Address: 16 USHER DRIVE  
City-St-Zip: BANBURY OXON ENGLAND, UK OX161AJ UK

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: DANIEL A. BOLINO

CAM

02/07/2008

Electronic Signature of Signing Officer or Director

Date