

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # 758583 (9)

1. Corporation Name
SUN ISLE CONDOMINIUM ASSOCIATION OF MERRITT ISLAND, INC.

Principal Place of Business P O BOX 540512 MERRITT ISLAND FL 32954-7512	Mailing Address P O BOX 540512 MERRITT ISLAND FL 32954-7512
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 06/01/1981	3a. Date of Last Report 02/25/1994
4. FEI Number 59-2263974	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	

9. Name and Address of Current Registered Agent

**YOUNG, GEORGE V
205 PALMETTO VE., NO. 406
MERRITT ISLAND FL 32953**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 FL Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 *George V. Young* **GEORGE V. YOUNG TREASURER** *14 January 1995*
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE P	NAME FLETCHER, JAMES
STREET ADDRESS 205 PALMETTO AVENUE #508	
CITY-ST-ZIP MERRITT ISLAND FL	
TITLE V	NAME BORTNICK, SHIRLEY
STREET ADDRESS 205 PALMETTO AVE #702	
CITY-ST-ZIP MERRITT ISLAND FL	
TITLE T	NAME YOUNG, GEORGE
STREET ADDRESS 206 PALMETTO AVENUE #406	
CITY-ST-ZIP MERRITT ISLAND FL	
TITLE S	NAME CARITHERS, HILDAGARD
STREET ADDRESS 205 PALMETTO AVENUE #309	
CITY-ST-ZIP MERRITT ISLAND FL	
TITLE D	NAME NARY, JAMES E
STREET ADDRESS 205 PALMETTO AVE #503	
CITY-ST-ZIP MERRITT ISLAND FL	
TITLE D	NAME ROOTS, RICHARD
STREET ADDRESS 205 PALMETTO AVE., NO. 409	
CITY-ST-ZIP MERRITT ISLAND FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D	1.2 NAME D	1.3 STREET ADDRESS D	1.4 CITY-ST-ZIP D	☒ Change ☐ Addition
2.1 TITLE S	2.2 NAME S	2.3 STREET ADDRESS S	2.4 CITY-ST-ZIP S	☒ Change ☐ Addition
3.1 TITLE S	3.2 NAME S	3.3 STREET ADDRESS S	3.4 CITY-ST-ZIP S	☒ Change ☐ Addition
4.1 TITLE S	4.2 NAME S	4.3 STREET ADDRESS S	4.4 CITY-ST-ZIP S	☒ Change ☐ Addition
5.1 TITLE S	5.2 NAME S	5.3 STREET ADDRESS S	5.4 CITY-ST-ZIP S	☒ Change ☐ Addition
6.1 TITLE S	6.2 NAME S	6.3 STREET ADDRESS S	6.4 CITY-ST-ZIP S	☒ Change ☐ Addition

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 110.07(3)(b), 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: *George V. Young* **TREASURER** *14 January 1995* **14 January 1995**
Signature and typed or printed name of signing officer or director Date