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 JUN -2 AM 9:11

DOCUMENT # **N06620** (1)

1. Corporation Name

THE HOMEOWNERS' ASSOCIATION OF THE SUNRISE GOLF CLUB ESTATES, INC.

Principal Place of Business	Mailing Address
5718 TAM O'SHANTER CT. SARASOTA FL 34238	5718 TAM O'SHANTER CT. SARASOTA FL 34238

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/13/1984
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2494004 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21 5712 Tam O'Shanter Cr	2a. Mailing Address 26 5712 Tam O'Shanter Ct	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
Suite, Apt. #, etc. 22 -	Suite, Apt. #, etc. 27 -	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
City & State 23 Sarasota, FL	City & State 28 Sarasota, FL	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
Zip / Country 24 34238 / 25 USA	Zip / Country 29 34238 / 30 USA	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HUNT, BARBARA J
5718 TAM O'SHANTER CT.
SARASOTA FL 34238

10. Name and Address of New Registered Agent

81 Name: Joe Swift
82 Street Address (P.O. Box Number is Not Acceptable): 5712 Tam O'Shanter Ct.
83
84 City: Sarasota, FL 85 Zip Code: 34238

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: Joseph W. Swift — May 24, 1995
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	PD	11 TITLE	PD ☐ Change ☐ Addition
NAME	HUNT, BARBARA J	12 NAME	Bailey, John H.
STREET ADDRESS	5718 TAM O'SHANTER CT.	13 STREET ADDRESS	5781 Augusta Circle
CITY-ST-ZIP	SARASOTA FL 34238	14 CITY-ST-ZIP	Sarasota, FL 34238
TITLE	VD	21 TITLE	STD ☐ Change ☐ Addition
NAME	SWIFT JOSEPH	22 NAME	Swift, Joseph
STREET ADDRESS	5712 TAM O'SHANTER CT.	23 STREET ADDRESS	5712 Tam O'Shanter Ct
CITY-ST-ZIP	SARASOTA FL 34238	24 CITY-ST-ZIP	Sarasota, FL 34238
TITLE	SD	31 TITLE	D ☐ Change ☐ Addition
NAME	ANDERSON, DARLENE	32 NAME	D'Alberto, Anne
STREET ADDRESS	6137 APPROACH RD.	33 STREET ADDRESS	5709 Augusta Circle
CITY-ST-ZIP	SARASOTA FL 34238	34 CITY-ST-ZIP	Sarasota, FL 34238
TITLE	TD	41 TITLE	D ☐ Change ☐ Addition
NAME	BEUSMAN NELLIE	42 NAME	Jennings, Chic
STREET ADDRESS	6038 APPROACH WAY	43 STREET ADDRESS	5719 Firestone Ct.
CITY-ST-ZIP	SARASTA FL 34238	44 CITY-ST-ZIP	Sarasota, FL 34238
TITLE	D	51 TITLE	D ☐ Change ☐ Addition
NAME	BAILEY JOHN H.	52 NAME	Grimes, Bernie
STREET ADDRESS	5781 AUGUSTA CIRCLE	53 STREET ADDRESS	5729 Augusta Circle
CITY-ST-ZIP	SARASOTA FL 34238	54 CITY-ST-ZIP	Sarasota, FL 34238
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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: Joseph W. Swift — 5.24.95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0063488