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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N06620

1. Corporation Name

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

Principal Place of Business

6137 APPROACH RD.
SARASOTA FL 34238
US

Mailing Address

6137 APPROACH RD.
SARASOTA FL 34238
US



1018821 90058 040

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	6137 Approach Rd.	26	Same	12/13/1984	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2494004	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Sarasota, Fl.	Same		6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
Zip		Zip		Trust Fund Contribution	
24	34238	25	Sarasota	29	Same
Country		Country		30	

9. Name and Address of Current Registered Agent

FREDERICK L. METZLER
6137 APPROACH RD.
SARASOTA FL 34238

10. Name and Address of New Registered Agent

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

FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Frederick L. Metzler*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/13/99

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	ANNE D'ALBERTO	1.2 NAME	Frederick Metzler
STREET ADDRESS	5709 AUGUSTA CIR.	1.3 STREET ADDRESS	6137 Approach Rd
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	Sarasota, FL 34238
TITLE	STD	2.1 TITLE	SD
NAME	METZLER, FREDERICK	2.2 NAME	Joan Metzler
STREET ADDRESS	6137 APPROACH RD.	2.3 STREET ADDRESS	6137 Approach Rd
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	Sarasota, FL 34238
TITLE	D	3.1 TITLE	TD
NAME	GRIMES, BERNIE	3.2 NAME	June Carney
STREET ADDRESS	5781 AUGUSTA CIR.	3.3 STREET ADDRESS	5703 Doral Ct.
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	Sarasota, FL 34238
TITLE		4.1 TITLE	D
NAME		4.2 NAME	Robert Carney
STREET ADDRESS		4.3 STREET ADDRESS	5703 Doral Ct.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Sarasota, FL 34238
TITLE		5.1 TITLE	D
NAME		5.2 NAME	Ken Gavins
STREET ADDRESS		5.3 STREET ADDRESS	5710 Doral Ct.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Sarasota, FL 34238
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

June C. Carney

(941) 922-1335

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/13/99

CR2E037 (11/98)