2004 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N00000002166



Apr 28, 2004 8:00 am Secretary of State

SUNRISE		OWNERS ASSOC	CIATION	, INC.					04-28	-2004 90	303 001 ***	70.00
2581 SUNRISE RIDGE LN.			2581	Mailing Address 2581 SUNRISE RIDGE LN. JACKSONVILLE, FL 32211-4377				97 (BB)((B) Q)	. 44 Earl Sain Sain Sain	03925	50 15 11851 11848 SILER	u (1)1 0 1 8 1 1 88 1
2. Principal Place of Business 3. Mailing A				g Address								
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				04212004	Chg-NP	CR2I	E037 (10/03)	
City & State			City	City & State				4. FEI Numbe 59-3635			1 +	applied For lot Applicable
Zip	<u>-</u>	Country	Zip	- ~	Cou	intry		5. Certificate	of Status Desire	ed 🔀		ditional
	6. Name	e and Address of Current	Registere	d Agent				7. Name and	Address of Ne	w Registere	ed Agent	
MOTE DI	CHADD					Name						
MOTE, RICHARD 2581 SUNRISE RIDGE LANE JACKSONVILLE, FL 32211-4377				Street Address			ddress ((P.O. Box Number is Not Acceptable)				
· · · · · · · · · · · · · · · · · · ·										F	Zip Co	de
		ty submits this statement fo stered agent.	or the purp	ose of changing its	register	ed office or	r register	red agent, or bot	h, in the State o			n, and accept
a to obligat	uona on rogia	· ·										
SIGNATURE .	Stongture type	d or printed name of registered agent	t and tills if and	/NOT	E: Boristera	A Annat signat	re reviver	t when reinstating)		DAI		
	argentities, types	or or business require or reflerences efform	iten concentable									
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	_	ee is \$61.25 May 1, 2004		9. Election Ca Trust Fund	mpaign F	inancing		\$5.00 May 8 Added to Fees	e	Make ch	eck payable partment of	
10.	_		IRECTORS	9. Election Ca	mpaign F	Financing ion.		\$5.00 May 8		Make ch	eck payable partment of	State
TITLE	PD PD	May 1, 2004 OFFICERS AND D	IRECTORS	9. Election Ca	mpaign F Contribut	Financing ion.	□ PD	\$5.00 May 8 Added to Fees ADDITIONS/CH/		Make ch	eck payable partment of	N 10
TITLE NAME	PD MOTE, R	May 1, 2004 OFFICERS AND DI	IRECTORS	9. Election Ca Trust Fund	mpaign F Contribut 11.	Financing tion.	□ PD	\$5.00 May B Added to Fees ADDITIONS/CH/	ANGES TO OFF	Make ch Florida De ICERS AND	eck payable partment of	N 10
TITLE NAME STREET ADDRESS	PD MOTE, R 2581 SU	May 1, 2004 OFFICERS AND DI RICHARD NRISE RIDGE LANE		9. Election Ca Trust Fund	mpaign F Contribut 11. IIIL NAM STRI	Financing ion. E E E E E T ADDRESS	Not Not	\$5.00 May B Added to Fees ADDITIONS/CH/	ANGES TO OFF	Make ch Florida De ICERS AND	partment of a DIRECTORS (State IN 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOTE, R 2581 SU	May 1, 2004 OFFICERS AND DI		9. Election Ca Trust Fund	mpaign F Contribut 11. IIIL NAM STRE	Financing ion. E E E T ADDRESS '-ST-ZIP	2881 1004 1004	\$5.00 May 8 Added to Fees ADDITIONS/CH/ E Rich Sunrisi Ksonville	ANGES TO OFF	Make ch Florida De ICERS AND	DIRECTORS Change	State N 10 Addition
TITLE NAME STREET ADDRESS	PD MOTE, R 2581 SUI JACKSO	May 1, 2004 OFFICERS AND DI RICHARD NRISE RIDGE LANE		9. Election Ca Trust Fund	mpaign F Contribut 11. IIIL NAM STRI	E E E ADORESS ST - ZP	17. Add 12. Ad	\$5.00 May 8 Added to Fees ADDITIONS/CHA E RICK SUMMISS KSONVILLE	ANGES TO OFF	Make ch Florida De ICERS AND	partment of a DIRECTORS (State N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MOTE, R 2581 SUI JACKSO VD GILBERT	OFFICERS AND DI OFFICERS AND DI RICHARD NRISE RIDGE LANE NVILLE, FL 32211437		9. Election Ca Trust Fund	mpaign F Contribut 11. IIIL NAM STRI CITY	E E E ADORESS ST - ZP	17. Add 12. Ad	\$5.00 May 8 Added to Fees ADDITIONS/CH/ E Rich Sunrisi Ksonville	ANGES TO OFF	Make ch Florida De ICERS AND	DIRECTORS Change	State N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MOTE, R 2581 SUI JACKSO VD GILBERT 2644 SUI	May 1, 2004 OFFICERS AND DI RICHARD NRISE RIDGE LANE NVILLE, FL 32211437	7	9. Election Ca Trust Fund	mpaign F Contribut 11. IIII NAM STRE CITY TITLL NAM STRE	E SE ADDRESS ST-ZP	17. Add 12. Ad	\$5.00 May 8 Added to Fees ADDITIONS/CHA E RICK SUMMISS KSONVILLE	ANGES TO OFF	Make ch Florida De ICERS AND	DIRECTORS Change	State N 10 Addition
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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: Lichard