

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90163 040 ****61.25

DOCUMENT # N24962

1. Entity Name

**SUNRISE AT FOUNTAIN LAKES NEIGHBORHOOD
ASSOCIATION, INC.**



Principal Place of Business

22201 FOUNTAIN LAKES BLVD
STE 1
ESTERO FL 33928
US

Mailing Address

P.O. BOX 2411
BONITA SPRINGS FL 34133
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

41-1613208

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C & H PROPERTY MANAGEMENT
22201 FOUNTAIN LAKES BLVD, STE 1
ESTERO FL 33928**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D MILSTEIN, JACQUELINE	<input type="checkbox"/> Delete
STREET ADDRESS	22661 ISLAND LAKES DRIVE	
CITY-ST-ZIP	ESTERO FL 33928-2340	
TITLE NAME	STD FYKES, SHIRLEY	<input type="checkbox"/> Delete
STREET ADDRESS	3880 MARYANN WAY	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE NAME	VD GOODWIN, HERSCHEL	<input type="checkbox"/> Delete
STREET ADDRESS	22632 WEST BRIDGE CT	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE NAME	PD GROTH, TERI	<input type="checkbox"/> Delete
STREET ADDRESS	22674 FOUNTAIN LAKES BLVD	
CITY-ST-ZIP	ESTERO FL 33928-2340	
TITLE NAME	D ZIMBRO, BETTY	<input type="checkbox"/> Delete
STREET ADDRESS	3910 MARYANN WAY	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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:

Theresa J. Groth Theresa J. Groth

4/27/05

495-3318

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #