

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 21, 2008 08:00 AM
Secretary of State

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 - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

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)

000000913144
05/08/08 00004 013 61.25

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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 DP ☐ Delete
NAME FYKES, SHIRLEY
STREET ADDRESS 3880 MARY ANN WAY
CITY-STATE-ZIP ESTERO FL 33928-2340

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE DVP ☐ Delete
NAME GROTH, TERRI
STREET ADDRESS 22674 FOUNTAIN LAKES BLVD.
CITY-STATE-ZIP ESTERO FL 33928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE D ☐ Delete
NAME GOODWIN, HERSCHEL
STREET ADDRESS 22632 WEST BRIDGE CT
CITY-STATE-ZIP ESTERO FL 33928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE DST ☐ Delete
NAME ZIMBO, BETTY
STREET ADDRESS 3910 MARY ANN WAY
CITY-STATE-ZIP ESTERO FL 33928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE D ☐ Delete
NAME METEYARD, DAVE
STREET ADDRESS 22668 FOREST VIEW DR
CITY-STATE-ZIP ESTERO FL 33928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Shirley Fykes*

4-18-08 239-992-9142