

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000001252

**Entity Name:** SUNBURST COVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

553 SOUTH DUNCAN AVENUE  
CLEARWATER, FL 33756

**Current Mailing Address:**

553 S DUNCAN AVENUE  
CLEARWATER, FL 33756

**FEI Number:** 20-8493994

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GALPIN, JULIA E  
553 SOUTH DUNCAN AVENUE  
CLEARWATER, FL 33756 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name BUCK, MARK  
Address 19730 GULF BLVD. # 700  
City-State-Zip: INDIAN SHORES FL 33785

Title P  
Name GOLDMAN, LYNN  
Address 19730 GULF BLVD #500  
City-State-Zip: INDIAN SHORES FL 33785

Title ST  
Name DEGEER, JUDY  
Address 19730 GULF BLVD # 200  
City-State-Zip: INDIAN SHORES FL 33785

Title VP  
Name BECKEL, MARY  
Address 7310 NORTH OLA AVENUE  
City-State-Zip: TAMPA FL 33604

Title D  
Name MULFINGER, CHARLES  
Address 3416 ALMERA AVENUE SOUTH  
City-State-Zip: TAMPA FL 33629

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LYNN GOLDMAN

**PRESIDENT**

**03/29/2013**

Electronic Signature of Signing Officer/Director Detail

Date