

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17563

**Entity Name:** SUN CITY CENTER COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**1009 N. PEBBLE BEACH BLVD.  
SUN CITY CENTER, FL 33573**Current Mailing Address:**1009 N. PEBBLE BEACH BLVD.  
SUN CITY CENTER, FL 33573 US**FEI Number:** 59-2746620**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DONNER, CAROL R EXEC SEC  
1009 N. PEBBLE BEACH BVD.  
SUN CITY CENTER, FL 33573 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:** CAROL R. DONNER

01/25/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name LUPER, JOHN M.  
Address 1009 N. PEBBLE BEACH BLVD.  
City-State-Zip: SUN CITY CENTER FL 33573

Title VPD  
Name ELAM, JOE W.  
Address 1009 N. PEBBLE BEACH BLVD.  
City-State-Zip: SUN CITY CENTER FL 33573

Title S  
Name SUDMAN, MARVIN S.  
Address 1009 N. PEBBLE BEACH BLVD.  
City-State-Zip: SUN CITY CENTER FL 33573

Title TD  
Name SCHWARTZ, JAMES L.  
Address 1009 N. PEBBLE BEACH BLVD.  
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR  
Name COTE-MILLER, MARILYN  
Address 1009 N. PEBBLE BEACH BLVD.  
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR  
Name LEWIS, HELEN  
Address 1009 N. PEBBLE BEACH BLVD.  
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR  
Name SULLIVAN, ROBERT  
Address 1009 N. PEBBLE BEACH BLVD.  
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR  
Name BIRKETT, DAVID  
Address 1009 N. PEBBLE BEACH BLVD.  
City-State-Zip: SUN CITY CENTER FL 33573

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*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:** MARVIN S. SUDMAN**SECRETARY**

01/25/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	SANCHEZ, ROBERT
Address	1009 N. PEBBLE BEACH BLVD.
City-State-Zip:	SUN CITY CENTER FL 33573