Entity Name INC.	SUNSET VIEW APARTMENTS HOMEOWN	IERS ASSOCI		retary of State 96109218CC
Current Prin	ncipal Place of Business: DRIVE			
LAKE PLACID,	FL 33852			
Current Mai	ling Address:			
PO BOX 108 OKEECHOE	34 BEE, FL 34973-1084 US			
FEI Number: 59-3473476			Certificate of Statu	is Desired: No
Name and A	Address of Current Registered Agent:			
Corwin, Mike 227 n. Ridgev Sebring, Fl	VOOD DR.			
The above name	d antity submits this statement for the summers of changing its regard			
	d entity submits this statement for the purpose of changing its regi	sterea onice or regis	tered agent, or both, in the St	ate of Florida.
	E: MIKE D CORWIN	stered onice or regis	tered agent, or both, in the St	ate of Florida. 01/23/2020
		sterea onice or regis	erea agent, or both, in the St	
	Electronic Signature of Registered Agent	stered onice or regis	ered agent, or both, in the St	01/23/2020
SIGNATURE	Electronic Signature of Registered Agent	Title	stre agent, or both, in the St	01/23/2020
SIGNATURE Officer/Dire	MIKE D CORWIN Electronic Signature of Registered Agent ctor Detail :			01/23/2020
SIGNATURE Officer/Dire	EIECTRONIC Signature of Registered Agent Ctor Detail : PVD	Title	STD	01/23/2020
SIGNATURE Officer/Dire Title Name	MIKE D CORWIN Electronic Signature of Registered Agent Ctor Detail : PVD CORWIN, MATTHEW D	Title Name	STD CORWIN, MIKE D PO BOX 1084	01/23/2020 Date
SIGNATURE Officer/Dire Title Name Address	EIECTRONIC Signature of Registered Agent Ctor Detail : PVD CORWIN, MATTHEW D PO BOX 1084	Title Name Address	STD CORWIN, MIKE D PO BOX 1084	01/23/2020 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	E MIKE D CORWIN Electronic Signature of Registered Agent Ctor Detail : PVD CORWIN, MATTHEW D PO BOX 1084 OKEECHOBEE FL 34973-1084	Title Name Address	STD CORWIN, MIKE D PO BOX 1084	01/23/2020 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	E MIKE D CORWIN Electronic Signature of Registered Agent Ctor Detail : PVD CORWIN, MATTHEW D PO BOX 1084 OKEECHOBEE FL 34973-1084 D	Title Name Address	STD CORWIN, MIKE D PO BOX 1084	01/23/2020 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title Name Address	E MIKE D CORWIN Electronic Signature of Registered Agent Ctor Detail : PVD CORWIN, MATTHEW D PO BOX 1084 OKEECHOBEE FL 34973-1084 D MCCULLERS, BILLY J JR.	Title Name Address	STD CORWIN, MIKE D PO BOX 1084	01/23/2020 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title Name Address	E MIKE D CORWIN Electronic Signature of Registered Agent Ctor Detail : PVD CORWIN, MATTHEW D PO BOX 1084 OKEECHOBEE FL 34973-1084 D MCCULLERS, BILLY J JR. 2935 N.W. 47TH AVENUE	Title Name Address	STD CORWIN, MIKE D PO BOX 1084	01/23/2020 Date

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9700005226

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: MIKE D CORWIN

Electronic Signature of Signing Officer/Director Detail

SECRETARY

01/23/2020 Date

FILED Jan 23, 2020

Secretary of State