


# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

<b>DOCUMENT # 392864</b> 1. Entity Name <b>SUNDOWNER PROPERTIES, INC.</b>						<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>FILED</b>  <b>08 NOV 24 AM 9:03</b>  <b>CLERK OF COURT</b>  <b>TALLAHASSEE, FLORIDA</b> </div>	
Principal Place of Business <b>4315 METRO PARKWAY</b> <b>SUITE 500</b> <b>FT. MYERS, FL 33916 US</b>				Mailing Address <b>4315 METRO PARKWAY</b> <b>SUITE 500</b> <b>FT. MYERS, FL 33916 US</b>			
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number <b>59-1370463</b>				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>NATIELLO, JOHN A</b> <b>4315 METRO PARKWAY</b> <b>SUITE 500</b> <b>FT. MYERS, FL 33916</b>				7. Name and Address of New Registered Agent Name <b>ROTH, JEFFREY H.</b> Street Address (P.O. Box Number is Not Acceptable) <b>4315 METRO PARKWAY</b> <b>SUITE 500</b> City <b>FORT MYERS</b> <b>FL</b> Zip Code <b>33916</b>			
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 <u>Jeffrey H. Roth, VP</u> <span style="float: right;">DATE <u>11/2/08</u></span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>							
<b>Amended AR is \$61.25</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOLQUIST, LAURA A 4315 METRO PARKWAY, SUITE 500 FT. MYERS, FL 33916	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	500138238645 Change <input type="checkbox"/> Addition 11/24/08--01059--010 **\$61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HORVATH, MARGARET 4315 METRO PARKWAY, SUITE 500 FT. MYERS, FL 33916	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS NATIELLO, JOHN A 4315 METRO PARKWAY, SUITE 500 FT. MYERS, FL 33916	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS HUGHES, HEIDI 4315 METRO PARKWAY, SUITE 500 FORT MYERS, FL 33916	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ROTH, JEFFREY H 4315 METRO PARKWAY, SUITE 500 FORT MYERS, FL 33916	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS LIVINGSTON, WILLIAM I. ONE CORPORATE DRIVE, SUITE 3A PALM COAST, FL 32137-4715	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 607, 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: <u>Jeffrey H. Roth, VP</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>11/2/08</u> Daytime Phone # <u>239-333-3300</u>			