2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2004 8:00 am
Secretary of State
03-01-2004 90055 042 ****61.25
08-25-2004 90001 043 ****61.25

DOCUMENT # 719151

1. Entity Name
SUNSET HOUSE NORTH APARTMENTS OF MARCO ISLAND, INC.

54069722

Principal Place of Business	Mailing Address
240 SEAVIEW COURT MARCO ISLAND, FL 34145	240 SEAVIEW COURT MARCO ISLAND, FL 34145

07122004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1318900 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~NAGELHOUT, GREGG~~
~~240 SEAVIEW CT.~~
~~104~~
~~MARCO ISLAND, FL 34145~~

7. Name and Address of New Registered Agent

Name: Jamie B Greusel
Street Address (P.O. Box Number is Not Acceptable): 1104 N Collier Blvd
City: Marco Island FL Zip Code: 34145

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: Jamie B Greusel 8/19/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 8, 2004

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P BERTRAM, PAUL 412 THIRD ST. MARIETTA, OH 45750	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CANDITO, KENNETH 207 DRESSER HILL RD. DUDLEY, MA 01571	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEVREE, CARL 1616 LARAMY LN. HUDSONVILLE, MI 49426	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KENNING, SUSAN 6331 MARSHALL RD. CENTERVILLE, OH 45459	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Hughes, Betty 7944 Peninsula Drive Traverse City, MI 49686 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOCASCIO, JULIE 240 SEAVIEW CT. #606 MARCO ISLAND, FL 34145	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Kiemel, Kay 24108 S 80 Ave. Frankfort, IL 60423 ☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Julie Locascio 8/12/04 394-7391
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #