

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90302 004 ****61.25

DOCUMENT # 719151	
1. Entity Name SUNSET HOUSE NORTH APARTMENTS OF MARCO ISLAND, INC.	

Principal Place of Business 240 SEAVIEW COURT MARCO ISLAND, FL 34145	Mailing Address 240 SEAVIEW COURT MARCO ISLAND, FL 34145
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40060887



03302005 Chg-NP CR2E037 (10/03)

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		7. Name and Address of New Registered Agent	
GREUSEL, JAMIE B 1104 N COLLIER BLVD MARCO ISLAND, FL 34145		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

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	D DEVREE, CARL 1616 LARAMY LN. HUDSONVILLE, MI 49426 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RD Devree, Carl 1616 Laramy Ln. Hudsonville MI 49426 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUGHES, BETTY 7944 PENINSULA DR TRAVERSE CITY, MI 49686 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Hughes, Betty 7944 Peninsula Dr Traverse City MI 49686 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V 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	D KIEMEL, KAY 24108 S 80 AVE FRANKFORT, IL 60423 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Kiemel, Kay 24108 S. 80 Ave Frankfort IL 60423 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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: Betty Hughes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/08/05 239-394-7391
Date Daytime Phone #

Betty Hughes