


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2007 8:00 am
Secretary of State

02-28-2007 90015 010 ****61.25

DOCUMENT # 724629	
1. Entity Name SUNRISE COVE CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business SUNRISE COVE CONDO ASSOC 2477 STICKNEY POINT ROAD, STE 118A SARASOTA FL 34231	Mailing Address SUNRISE COVE CONDO ASSOC 2477 STICKNEY POINT ROAD, STE 118A SARASOTA FL 34231
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 59-1507154	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HAMMERLING, WALTER E 2477 STICKNEY POINT ROAD, STE 118A SARASOTA FL 34231
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>	DATE _____
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FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SCHMIDT, EDWARD 8911 MIDNIGHT PASS RD, #510 SARASOTA FL 34242 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CRIFFIELD, MEL 8977 MIDNIGHT PASS RD. #423 SARASOTA FL 34242 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HULLOCK, GEORGE 9011 MIDNIGHT PASS RD., #330 SARASOTA FL 34242 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HESSER, JUDITH 9011 MIDNIGHT PASS RD, #331 SARASOTA FL 34242 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS HAMMERLING, WALTER 2477 STICKNEY POINT RD, STE 118A SARASOTA FL 34231 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SIEGEL, SID 8977 MIDNIGHT PASS RD #419 SARASOTA FL 34243 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Roth, Ron 4011 M. midnight Pass Rd. #328 Sarasota FL 34242
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D Schuchardt Jack 8897 M. midnight Pass Rd. #506 Sarasota FL 34232
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition George K. Pury 8977 M. midnight Pass Rd. #322 Sarasota FL 34242
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Leonard Jack 8977 M. midnight Pass Rd #307 Sarasota FL 34242
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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: <u>Ronald L. Roth</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	RONALD L. ROTH	8 FEB 07 (941) 349-8630
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