

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726597

FILED
Apr 24, 2009
Secretary of State

Entity Name: SUN CITY CENTER WEST MASTER ASSOCIATION, INC.

Current Principal Place of Business:

24301 WALDEN CENTER DR.
STE 300
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

2020 CLUBHOUSE DR
SUN CITY CENTER, FL 33573 US

New Mailing Address:

1904 CLUBHOUSE DR
SUN CITY CENTER, FL 33573 US

FEI Number: 59-2303468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HASTINGS, VIVEN
24301 WALDEN CENTER DR
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: NORM, ROBERTS
Address: 2020 CLUBHOUSE DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: PD () Delete
Name: LUPER, JOHN
Address: 2020 CLUBHOUSE DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VPD () Delete
Name: SCOTT, HAROLD
Address: 801 MANCHESTER DR
City-St-Zip: SUN CITY CENTER, FL 33571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOHN LUPER

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date