2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

RUSKIN FL 33570

CITY-ST-ZIP

Feb 01, 2005 8:00 am Secretary of State **DOCUMENT # 735788** 1. Entity Name 02-01-2005 90041 002 ****61.25 SUN CITY SUBDIVISION PROPERTY OWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 3501 COMPSON 3501 COMPSON RUSKIN FL 33570 **RUSKIN FL 33570** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-3239561 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name: STEWART, GARY L Street Address (P.O. Box Number is Not Acceptable) 3501 COMPSON CIRCLE RUSKIN FL 33570 FL 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change **₹** Addition STEWART, GARY JOHNSON, Sue NAME NAME 3501 COMPSON CIR. 3603 Petrova STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP RUSKIN, FL 33570 TITLE **T**Addition ☐ Delete TITLE ☐ Change SCHOONMAKER, MARY THOMAS, MARGE NAME NAME 3602 PARAMOUNT 2405 STUDIO STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 RUSKIN, FL 33570 CITY-ST-ZIP CITY-ST-ZIP TITLE X Delete TITLE ☐KAddition Change LEGG, JEANETTE SWANEY, KENNETH NAME 2302 LLOYD 3604 PARAMONT STREET ADDRESS STREET ADDRESS RÚSKIN, FL 33570 RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition KNOBLOCK, BILL 2425 METRO STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-7IP CITY-ST-ZIP ח ☐ Delete TITLE Change Addition COLES, JAMES NAME NAME 3605 PETROVA STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-7(P TITLE ☐ Delete TITLE Change ☐ Addition STEWARD, MARILYN NAME NAME 3501 COMPSON CIR. STREET ADDRESS STREET ADDRESS

FILED

RY L STEWART, Director SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 01/20/2005(813)645-3745 SIGNATURE: GARY

CITY-ST-ZIP

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 at trustee employered to 9-coute 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 ormalize employered.