2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735788

FILED Jun 22, 2009 Secretary of State

Entity Name: SUN CITY SUBDIVISION PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
3501 COM RUSKIN, I			
Current Mailing Address:		New Mailing Address:	
3501 CON RUSKIN, I			
In accordan	: 59-3239561 FEI Number Applied For() FEI I ice with s. 607.193(2)(b), F.S., the corporation did not received I Address of Current Registered Agent:	· ·	
	T, GARY L IPSON CIRCLE FL 33570 US		
	e named entity submits this statement for the purpos e of Florida.	e of changing	its registered office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITIO	NS/CHANGES TO OFFICERS AND DIRECTOR:
Title: Name: Address:	D () Delete STEWART, GARY 3501 COMPSON CIR. RUSKIN, FL 33570	Title: Name: Address:	() Change () Addition
City-St-Zip.	1001011, 12 00070	City-St-Zip:	
Title: Name: Address:	T () Delete THOMAS, MARGE 2405 STUDIO RUSKIN, FL 33570	City-St-Zip: Title: Name: Address: City-St-Zip:	D (X) Change () Addition THOMAS, MARGE 2405 STUDIO RUSKIN, FL 33570
Title: Name: Address: City-St-Zip: Title: Name: Address:	T () Delete THOMAS, MARGE 2405 STUDIO	Title: Name: Address:	THOMAS, MARGE 2405 STUDIO
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Othersis	T () Delete THOMAS, MARGE 2405 STUDIO RUSKIN, FL 33570 D () Delete JOHNSON, SUE 3603 PETROVA	Title: Name: Address: City-St-Zip: Title: Name: Address:	THOMAS, MARGE 2405 STUDIO RUSKIN, FL 33570
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	T () Delete THOMAS, MARGE 2405 STUDIO RUSKIN, FL 33570 D () Delete JOHNSON, SUE 3603 PETROVA RUSKIN, FL 33570 D () Delete KNOBLOCK, BILL 2425 METRO	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	THOMAS, MARGE 2405 STUDIO RUSKIN, FL 33570 () Change () Addition

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: GARY L STEWART D 06/22/2009