


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2008 8:00 am
Secretary of State

05-19-2008 90033 020 ****61.25

DOCUMENT # 738875 1. Entity Name SUNSET SOUTH CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 1341 MIDDLE GULF DR. SANIBEL, FL 33957-4618	Mailing Address 1341 MIDDLE GULF DR. SANIBEL, FL 33957-4618
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

FILE MANAGEMENT
40103881



01182008 Chg-NP CR2E037 (12/06)

6. Name and Address of Current Registered Agent STROEMER TUSCAN & COMPANY, P.A. 1640 PERIWINKLE WAY STE 4 SANIBEL, FL 33957	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 _____
Signature: typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2008	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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BANNISTER, ROBERT 1341 MIDDLE GULF DR, 9C SANIBEL, FL 33957 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BANNISTER, Robert 1341 MIDDLE GULF DR 9C SANIBEL FL 33957 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OLSON, JIM 1341 MIDDLE GULF DRIVE #4-C SANIBEL, FL 33957 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEVEN CRAMER 1341 MIDDLE GULF DR 11C SANIBEL FL 33957 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HALLERAN, NEAL 1341 MIDDLE GULF DRIVE 3D SANIBEL, FL 33957 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HALLERAN, NEAL 1341 MIDDLE GULF DR 3D SANIBEL FL 33957 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROWN, ELMER 1340 MIDDLE GULF DR 6-D SANIBEL, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEORGE CLARK 1341 MIDDLE GULF DR 2A SANIBEL FL 33957 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PODLASEK, CARL 1341 MIDDLE GULF DR, 1B SANIBEL, FL 33957 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAME BYRNE 1341 MIDDLE GULF DR 2B SANIBEL FL 33957 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MILLER, MICHAEL 8961 CONFERENCE DR STE 2 FORT MYERS, FL 33919 <input type="checkbox"/> Delete	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 Chapter 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: Robert C. Bannister **ROBERT C. BANNISTER** President 239-395-1360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
40103881

Charlie Crist, Governor
Chuck Drago, Interim Secretary

#738875

May 7, 2008

SUNSET SOUTH CONDO ASSN
1341 MIDDLE GULF DR
SANIBEL, FL 33957

RE: CORRESPONDENCE RETURN

To Whom It May Concern:

The enclosed check and paperwork is not for the Department of Business and Professional Regulation, therefore we are returning the paperwork and check #002697 in the amount of \$61.25. Your check should be made payable to the Department of State and mailed to them along with your paperwork.

Thank you for your cooperation. If you have any questions, please call the number shown below.

sat
enclosure

Please Note:
It was mailed
in time but to
incorrect address.
Thank you