2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743007

FILED Apr 23, 2007 Secretary of State

Entity Name: SUNDOWNERS PROPERTY OWNERS' ASSOCIATION, INC.

Current Prin	ncipal Place o	f Business:	New Principal Place	e of Business:
1501 53RD A VERO BEAC	AVENUE CH, FL 32966	US		
Current Mail	ling Address:		New Mailing Addres	ss:
1501 53RD A VERO BEAC	AVENUE CH, FL 32966	US		
FEI Number: 59	9-1886131	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and A	ddress of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:
BODNAR, BA 1501 53RD A VERO BEAC		US		
	amed entity su	bmits this statement for the pu	urpose of changing its registere	ed office or registered agent, or both,
		,		
in the State o	of Florida.	·		
in the State o	of Florida.	Signature of Registered Age		Date
in the State o	of Florida.	Signature of Registered Age	nt	Date GES TO OFFICERS AND DIRECTORS
in the State or SIGNATURE OFFICERS # Title: F Name: H Address: 1	of Florida. E: Electronic	Signature of Registered Agel ORS: elete	nt	
in the State of SIGNATURE OFFICERS A Title: F Name: H Address: 1 City-St-Zip: V Title: T Name: E Address: 1	of Florida. Electronic AND DIRECTO PD ()D HEIM, DARLENE 1512 53RD AVEN	Signature of Registered Age DRS: elete UE 32966 elete RA UE	nt ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTORS
in the State of SIGNATURE OFFICERS # Title: F Name: H Address: 1 City-St-Zip: V Title: T Name: E Address: 1 City-St-Zip: V Title: S Name: G Address: F	Electronic Electronic AND DIRECTO PD ()D HEIM, DARLENE 1512 53RD AVEN VERO BEACH, FL TD ()D BODNAR, BARBA 1501 53RD AVEN	Signature of Registered Ager DRS: elete UE 32966 elete RA UE 32966 elete	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () 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: BARBARA BODNAR TD 04/23/2007