2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744537

FILED Feb 06, 2008 Secretary of State

Entity Name: SUNRISE BAY RESORT AND CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10 TAMPA PLACE

MARCO ISLAND, FL 34145 US

Current Mailing Address: New Mailing Address:

10 TAMPA PLACE

MARCO ISLAND, FL 34145 US

FEI Number: 59-2445812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEIGH, DAVID ESQ 5150 TAMIAMI TRAIL, N SUITE 500 NAPLES, FL 34103 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete ARMSTRONG, IRA ARMSTRONG, IRA Name: Name: 110 EDWARD AVE Address: 110 EDWARD AVE Address:

City-St-Zip: LEHIGH ACRES, FL City-St-Zip: LEHIGH ACRES, FL Title: () Delete Title: (X) Change () Addition

PESCATRICE, JOSEPH Name: PESCATRICE, JOSEPH C Name: Address: 2712 SW 13TH AVENUE Address: 2712 SW 13TH AVENUE City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33914

Title: () Delete Title: (X) Change () Addition PRIMUS, ROGER A PRIMUS, ROGER A Name: Name:

730 WATERFORD DRIVE #203 730 WATERFORD DRIVE #203 Address: Address:

City-St-Zip: NAPLES, FL 34113 City-St-Zip: NAPLES, FL 34113

Title: ST () Delete Title: (X) Change () Addition

Name: FREY, DONALD Name: FREY, DONALD Address: 478 PERSIAN CT Address: 478 PERSIAN CT

MARCO ISLAND, FL 34145 City-St-Zip: City-St-Zip: MARCO ISLAND, FL 34145

Title: () Delete Title: () Change () Addition

TRIOLA, PETER Name: Name: 887 MANATEE ROAD Address: Address: City-St-Zip: NAPLES, FL 34114 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: JOSEPH C. PESCATRICE **PRES** 02/06/2008