

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752065

FILED
Mar 30, 2009
Secretary of State

Entity Name: SUNSHINE LAKE CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

6638 BALLARD LANE
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

Current Mailing Address:

6638 BALLARD LANE
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GOINGS, EUGENE
6638 BALLAD LANE
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMELSER, GEORGE
Address: 7420 HOB LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VP () Delete
Name: GOINGS, EUGENE
Address: 6638 BALLARD LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: S () Delete
Name: PODNAR, RITA
Address: 6652 BALLAD LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T () Delete
Name: SCOTT, ANNA MARIE
Address: 7439 GIMBEL LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D () Delete
Name: EXELL, RONALD
Address: 7431 CARNIVAL LANE
City-St-Zip: NEW PT RICHEY, FL 34653

Title: D () Delete
Name: GOINES, EUGENE
Address: 6638 BALLAD LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, ROBERT E
Address: 6547 LAMPREY LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: JONES, CAROL
Address: 7407 FAST LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SCOTT, ANNA MARIE
Address: 7439 GIMBEL LANE
City-St-Zip: NEW PORT RICHEY, FL 34653

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: ROBERT E JONES

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date