2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2008
Secretary of State

DOCUMENT# 754277

Entity Name: VILLAS OF SUNSET GROVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2075 SUNSET GROVE LN.
CLEARWATER, FL 33765 US

New Principal Place of Business:

1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

Current Mailing Address:

PO BOX 14357
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-2063672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERI-TECH REALITY
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 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: PD ( ) Delete
Name: BRUNSON, PATRICIA
Address: 2041 SUNSET GROVES LANE
City-St-Zip: CLEARWATER, FL 33765

Title: VPD ( ) Delete
Name: GARCIA, LESLIE
Address: 2034 SUNSET GROVES LANE
City-St-Zip: CLEARWATER, FL 33765

Title: SD ( ) Delete
Name: JENKINS, HELEN
Address: 2015 SUNSET GROVES LANE
City-St-Zip: CLEARWATER, FL 33765 US

Title: TD ( ) Delete
Name: DUYNE, DAVID V
Address: 2036 SUNSET GROVE LN
City-St-Zip: CLEARWATER, FL 33765 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: PATRICIA BRUNSON PD 03/08/2008

Electronic Signature of Signing Officer or Director — Date