

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90010 021 ****70.00

DOCUMENT # 756927

1. Entity Name

SUNSHINE MANOR ASSOCIATION, INC.

Principal Place of Business

5000 S.E. FEDERAL HWY
STUART FL 34997
US

Mailing Address

5000 S.E. FEDERAL HWY
STUART FL 34997
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2370057

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HALIK, NANCY
5000 SE FEDERAL HWY.
STUART FL 34997

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE *Nancy Halik*

NANCY HALIK TREASURER

FEB. 9, 2001

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME HAHN, DORIS ☒ Delete
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART FL 34997

TITLE P
NAME CHUCK BERGENDAL ☒ Change ☐ Addition
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART, FL. 34997

TITLE VP
NAME MOORE, DAVID ☒ Delete
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART FL 34997

TITLE VP
NAME SALLY LONGMIRE ☒ Change ☐ Addition
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART, FL. 34997

TITLE S
NAME FORD, LAURETTA ☐ Delete
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART FL 34997

TITLE S
NAME LAURETTA FORD ☐ Change ☐ Addition
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART, FL. 34997

TITLE T
NAME HALIK, NANCY ☐ Delete
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART FL 34997

TITLE T
NAME HALIK, NANCY ☐ Change ☐ Addition
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART, FL. 34997

TITLE D
NAME BOSSARD, LUCILLE ☐ Delete
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART FL 34997

TITLE D
NAME BOSSARD, LUCILLE ☐ Change ☐ Addition
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART, FL. 34997

TITLE D
NAME BLOOMER, EDNA ☒ Delete
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART FL 34997

TITLE D
NAME HAHN, DORIS ☒ Change ☐ Addition
STREET ADDRESS 5000 SE FEDERAL HWY
CITY-ST-ZIP STUART, FL. 34997

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Nancy Halik* NANCY HALIK

FEB. 9, 2001

561-287- 4288

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)