

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756927

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: SUNSHINE MANOR ASSOCIATION, INC.

## Current Principal Place of Business:

5000 S.E. FEDERAL HWY  
LOT 3301  
STUART, FL 34997 US

## New Principal Place of Business:

## Current Mailing Address:

5000 S.E. FEDERAL HWY  
LOT 3301  
STUART, FL 34997 US

## New Mailing Address:

FEI Number: 59-2370057

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BEAVER, NANCY J  
5000 SE FEDERAL HWY.  
LOT 3301  
STUART, FL 34997 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: V ( ) Delete  
Name: FELDPAUSCH, PEG  
Address: 5000 S.E. FEDERAL HWY LOT 401  
City-St-Zip: STUART, FL 34997

Title: P ( ) Delete  
Name: BEAVER, NANCY  
Address: 5000 S.E. FEDERAL HWY LOT 3301  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: HOLMAN, ROSEMARY  
Address: 5000 SE FEDERAL HWY.  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: HOLMES, ED  
Address: 5000 S.E. FEDERAL HWY LOT 506  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: DEROSA, WILLIAM  
Address: 5000 S.E. FEDERAL HWY LOT 152  
City-St-Zip: STUART, FL 34997

## 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:

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: NANCY J. BEAVER

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date