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FILED
Jun 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 757515 (2)

1. Corporation Name
SUNSET VIEW CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business % BARBARA MCDERMOTT 35 SANDDOLLAR LN. ENGLEWOOD FL 34223 US	Mailing Address % BARBARA MCDERMOTT 900 LEMON BAY DR. VENICE FL 34293 US
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3. Date Incorporated or Qualified
04/13/1981

4. FEI Number
65-0100208

Applied For	Not Applicable
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21. Principal Place of Business Suite, Apt. #, etc.	26. Mailing Address Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. Zip Country	29. Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**DICKINSON, ROBERT A
460 S INDIANA AVE
ENGLEWOOD FL**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	WHALEN, JOSEPH	
STREET ADDRESS	2933 PACIFIC AVE	
CITY-ST-ZIP	WALL NJ	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	KENNETT, ROBERT	
STREET ADDRESS	2001 MCCALL RD S	
CITY-ST-ZIP	ENGLEWOOD FL	
TITLE	DTS	<input checked="" type="checkbox"/> DELETE
NAME	MCDERMOTT, BARBARA	
STREET ADDRESS	900 LEMON BAY DR.	
CITY-ST-ZIP	VENICE FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	BOJAN, JAY	
STREET ADDRESS	21103 W BRANDON RD	
CITY-ST-ZIP	KILDEER IL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DT /S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	WHALEN, JOSEPH	
1.3 STREET ADDRESS	2933 PACIFIC AVE	
1.4 CITY-ST-ZIP	WALL N.J.	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	KENNETT ROBERT	
2.3 STREET ADDRESS	2001 MCCALL RD. S.	
2.4 CITY-ST-ZIP	ENGLEWOOD FL.	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	bojan jay	
4.3 STREET ADDRESS	21103 W.BRANDON RD.	
4.4 CITY-ST-ZIP	KILDEER IL.	
5.1 TITLE	DVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	GAIL A. SINGLER	
5.3 STREET ADDRESS	1681 Tonya Trail	
5.4 CITY-ST-ZIP	Neenah WI 54956	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Gail A. Singler* Gail A. Singler 4/29/98

CR2E037 (10/97)