

# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 OCT 29 AM 11:19

<b>DOCUMENT # 758583</b> 1. Entity Name <b>SUN ISLE CONDOMINIUM ASSOCIATION OF MERRITT ISLAND, INC.</b>					
Principal Place of Business <b>205 PALMETTO AVE MERRITT ISLAND, FL 32954-0512</b>			Mailing Address <b>P.O. BOX 540512 MERRITT ISLAND, FL 32954-0512</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-2263974</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>YOUNG, GEORGE V 205 PALMETTO VE., NO. 406 MERRITT ISLAND, FL 32953</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City	
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. I am familiar with, and accept the obligations of registered agent.				Signature _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input type="checkbox"/> Delete <b>BORTNICK, SHIRLEY 205 PALMETTO AVE #702 MERRITT ISLAND, FL</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete <b>YOUNG, GEORGE 208 PALMETTO AVENUE #406 MERRITT ISLAND, FL</b> Effective May 22, 2007				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete <b>PAULA, BETTY 205 PALMETTO AVENUE #405 MERRITT ISLAND, FL</b> Effective May 22, 2007				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> Delete <b>AYERS, LYNDIA 205 PALMETTO AVENUE #509 MERRITT ISLAND, FL 32953</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <input type="checkbox"/> Delete <b>DUMAS, JENNETTE 205 PALMETTO AVENUE #705 MERRITT ISLAND, FL 32953</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Ronald Buckley 205 Palmetto Ave., No. 505 Merritt Island, FL 32953</b> Effective January 30, 2007				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>George A. Powell 205 Palmetto Ave., No. 609 Merritt Island, FL 32953</b> Effective January 30, 2007				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>William Hanes 205 Palmetto Ave., No. 607 Merritt Island, FL 32953</b> Effective January 30, 2007				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>11/06/07--01016--020 **\$61.00</b>				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Jeannette Dumas</u> Jeannette Dumas 10/24/07 Home: 321 452-9417 Business 321 453-5397 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					