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May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760848 (2)

1. Corporation Name

SUNDOWN WOODS PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7850 SUNDOWN DRIVE NORTH ST. PETERSBURG FL 33709-1254 US	7850 SUNDOWN DRIVE NORTH ST. PETERSBURG FL 33709-1254 US

3. Date Incorporated or Qualified: 11/30/1981

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 6161 Sundown Dr	26 6161 Sundown Dr
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: St. Petersburg FL	28 City & State: St. Petersburg FL
24 Zip: 33709 25 Country: Pinellas	29 Zip: 33709 30 Country: Pinellas

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	10. Name and Address of New Registered Agent
WATSON, ROGER & KELSHA B 7850 SUNDOWN DRIVE NORTH ST. PETERSBURG FL 33709	81 Name: Victoria Schrock 82 Street Address (P.O. Box Number is Not Acceptable): 6161 Sundown Drive 83 84 City: St. Petersburg FL 85 Zip Code: 33709

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: Victoria Schrock Victoria Schrock, Treasurer 4/30/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☒ DELETE	1.1 TITLE	PRESIDENT	☐ Change ☒ Addition
NAME	WATSON, ROGER		1.2 NAME	Jo-Ann Bullock	
STREET ADDRESS	7850 SUNDOWN DRIVE NORTH		1.3 STREET ADDRESS	6160 Sundown Dr	
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-ST-ZIP	St. Petersburg, FL 33709	
TITLE	D	☒ DELETE	2.1 TITLE	VICE PRESIDENT	☐ Change ☒ Addition
NAME	AKERS, RANDY		2.2 NAME	Linda Bennett	
STREET ADDRESS	7823 SUNDOWN DR N		2.3 STREET ADDRESS	6110 Sundown Dr	
CITY-ST-ZIP	ST PETERSBURG, FL 00000		2.4 CITY-ST-ZIP	St. Petersburg, FL 33709	
TITLE	T	☒ DELETE	3.1 TITLE	SECRETARY	☐ Change ☒ Addition
NAME	KNOKE, TED		3.2 NAME	Joni McALPIN	
STREET ADDRESS	7840 SUNDOWN DRIVE, NORTH		3.3 STREET ADDRESS	7843 Sundown Dr	
CITY-ST-ZIP	ST PETERSBURG, FL 00000		3.4 CITY-ST-ZIP	St Petersburg, FL 33709	
TITLE	V	☒ DELETE	4.1 TITLE	TREASURER	☐ Change ☒ Addition
NAME	KELSHAW, BILL		4.2 NAME	Victoria Schrock	
STREET ADDRESS	6181 SUNDOWN DR N		4.3 STREET ADDRESS	6161 Sundown Dr	
CITY-ST-ZIP	ST. PETERSBURG FL		4.4 CITY-ST-ZIP	St. Petersburg FL 33709	
TITLE	D	☒ DELETE	5.1 TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	ROTUNNO, MARK		5.2 NAME	Ronnie King	
STREET ADDRESS	7832 SUNDOWN DRIVE NORTH		5.3 STREET ADDRESS	7872 Sundown Dr	
CITY-ST-ZIP	ST. PETERSBURG FL		5.4 CITY-ST-ZIP	St. Petersburg, FL 33709	
TITLE	D	☒ DELETE	6.1 TITLE	Director	☐ Change ☒ Addition
NAME	BRETTNER, CHRIS		6.2 NAME	RICHARD SMITH	
STREET ADDRESS	6180 SUNDOWN DRIVE, NORTH		6.3 STREET ADDRESS	6100 Sundown Dr	
CITY-ST-ZIP	ST. PETERSBURG FL		6.4 CITY-ST-ZIP	St. Petersburg, FL 33709	

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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: Victoria Schrock Victoria Schrock Treasurer 4/30/98 813 5443833