2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2004
Secretary of State

DOCUMENT# 760848

Entity Name: SUNDOWN WOODS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6161 SUNDOWN DR
ST. PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

6161 SUNDOWN DR
ST. PETERSBURG, FL 33709 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VICTORIA SCHROCK
6161 SUNDOWN DR
ST. PETERSBURG, FL 33709 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:	P	( ) Delete
Name:	MCALPIN, JONI	
Address:	7843 SUNDOWN DR	
City-St-Zip:	ST. PETERSBURG, FL 33709	
Title:	VP	( ) Delete
Name:	AKERS, DEBBIE	
Address:	7823 SUNDOWN DR	
City-St-Zip:	SAINT PETERSBURG, FL 33709	
Title:	S	( ) Delete
Name:	PIWONKA, BARB	
Address:	7853 SUNDOWN DR	
City-St-Zip:	SAINT PETERSBURG, FL 33709	
Title:	T	( ) Delete
Name:	VICTORIA SCHROCK,	
Address:	6161 SUNDOWN DR	
City-St-Zip:	ST. PETERSBURG, FL 33709	
Title:	D	( ) Delete
Name:	RONNIE KING,	
Address:	7872 SUNDOWN DR	
City-St-Zip:	ST. PETERSBURG, FL 33709	
Title:	D	( ) Delete
Name:	WATSON, ROGER	
Address:	7850 SUNDOWN DR	
City-St-Zip:	ST. PETERSBURG, FL 33709	

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:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VICTORIA SCHROCK T 09/02/2004
Electronic Signature of Signing Officer or Director — Date