## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Feb 28, 2007 8:00 am Secretary of State DOCUMENT# 761470 1. Entity Name 02-28-2007 90019 001 \*\*\*\*42.77 SUNRIDGE CONDOMINIUM ASSOCIATION, INC. 02-28-2007 90019 002 \*\*\*\*18.48 Principal Place of Business Mailing Address 929 SUNRIDGE DRIVE SARASOTA FL 34234 C/O C&S CONDO MGT 4301 32ND ST STE A-19 **BRADENTON FL 34205** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State 4. FEI Number Applied For City & State 59-2566082 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KOLLIATH, JULIE Street Address (P.O. Box Number is Not Acceptable) CTS CONDO MGT SERVICE 4301 32ND ST W STE A-19 **BRADENTON FL 34205** City Zip Code 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 Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Trust Fund Contribution. Florida Department of State Due By May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Dolete 11111 ☐ Change Addition TITLE NAM NAME MCLURE, RACHEL STREET ADDRESS STREET ADDRESS 954 SUNRIDGE DR W CITY-ST ZIP CITY-ST-7IP SARASOTA FL 34234 [ Change Delete Addition TITLE DVP TITLE NAME NAME KAPLAN, LISA STREET ADDRESS STREET ADDRESS 896 SUNRIDGE DR W CITY-ST-ZIP CITY ST-ZIP SARASOTA FL 34234 Change ☐ Delete TITLE ☐ Addition KTLL NAME NAME WAGNER, BONNIE STREET ADDRESS STREET ADDRESS 919 SÜNRIDGE DR CITY-ST-ZIP CHY-SI-ZIP SARASOTA FL 34234 Change ■ Addition ☐ Delete DILLE TITLE Ð NAME NAME COLTON, DIANE STREET ADDRESS SIRFET ADDRESS 904 SUNRIDGE DR CITY ST-7IP CITY ST-ZIP SARASOTA FL 34234 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAMO ROBINSON, JERRY STREET ADDRESS STREET ADDRESS 902 DUNRIDGE DR CITY-SI-ZIP CITY-ST-ZIP SARASOTA FL 34234 Delete Change Addition THE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SERRY ROBINSON 02-11-07

**FILED** 

## NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

1. Entity Nam	MENT # 76  GE CONDOMINIT	ON, INC.			ATTAC	CHMENT		
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			Mailing Addross					
929 SUNRIDGE DRIVE SARASOTA FL 34234			C/O C&S CONDO MGT 4301 32ND ST STE A-19 BRADENTON FL 34205					
2. Principal F	Place of Business - No	P.O. Box # 3.	. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, atc.			1st MOORE CR2E037 (10/06)		
City & State			City & State			4. FEI Number Applied For S9-2566082 Not Applicable		
Zip Country		ntry	Zip	Country		5. Certificate of Status Desired		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
KOLLIATH, JULIE CTS CONDO MGT SERVICE					Street Address (P.O. Box Number is Not Acceptable)			
430	11 32ND ST W S	STE A-19			· <u>-</u>		<del></del> -	
BHA	ADENTON FL 34	1205		City			FL Zip	Code
8. The above	named entity submits	this statement for the	purpose of changing its	registered office or	registor	ed agent, or both, in the Stat		with, and accept
the obligat	tions of rogistored age	nt.						
SIGNATURE	Cho la	il del	user	_				
SIGNATURE	Signature, typed or printed rid	ino of registered agent and fil	le il applicable. (NOII	Registered Agent signati	re recurred	when reinstating)	DATE	
FILE NOW: FEE IS \$61.25 Due By May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State			
		•					•	
10.	Due By May 1,	•	Trust Fund (			Added to Fees	Florida Department	of State
10. THEE NAME STREET ADORESS CITY SE-7/P	Due By May 1,	FICERS AND DIRECT	Trust Fund (	Contribution.			Florida Department	of State
TITII NAME STREET ADORESS	Due By May 1,  OF  D  MCLURE, RACHEL 954 SUNRIDGE DR	FICERS AND DIRECT	Trust Fund (	11. IIIIE NAMI STREET ADDRESS		Added to Fees	Florida Department	of State RS IN 10  fige □ Addition
NAME STREET ADORESS CITY SE-7IP HITE NAME	Due By May 1,  OF  D  MCLURE, RACHEL  954 SUNRIDGE DR  SARASOTA FL 342  DVP  KAPLAN, LISA	2007 FICERS AND DIRECT W 234	Trust Fund C	11. IIIIE NAMI SIRELIADORISS CITY SE ZIP IIIIE NAMI		Added to Fees	Florida Department  DEFICERS AND DIRECTOR  DEMA	of State RS IN 10  fige □ Addition
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TERRY ROBINSON 02-11-07 720-3763

SIGNING OFFICER OR DIRECTOR

Date

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