2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #764061

1. Entity Name SUNCHASE CONDOMINIUM ASSOCIATION OF GULF



Apr 30, 2007 8:00 am Secretary of State 04-30-2007 90459 008 ****61.25

FILED

BREEZE,INC.	
Principal Place of Business	Mailing Address
3298 SUMMIT BLVD	3298 SUMMIT BLVD

STE 4 DENCAPOLA EL 20E02

STE 4

2. Principal Place of Business - No P.O. Box # 3. Maiting Address										
z. Principal P	race of pusitiess - No F.O. box #	3. Maning Address			 	ETAN KATA AKETA		Billet At tent		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		- 11	01112007 C	hg-NP	CR2E037 (12/06)			
City & State	е	City & State			4. FEI Number 59-226705	56	 -	pplied For ot Applicable		
Zip	Country	Zip	Country		5. Certificate of S	tatus Desired	\$8.75 Ad	ditional		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
ETHERIN	DE BAYO		Nan	e						
3298 SUM	BE, RAY O. MIT BLVD		Stre	et Address	(P.O. Box Number is	Not Acceptab	le)			
STE 4										
PENSACOLA, FL 32503										
			City				FL Zip Coo	de		
	named entity submits this statement for the	e purpose of changing its r	registered office	e or registe	ered agent, or both, in	the State of F	lorida. I am familiar with	, and accept		
the obligations of registered agent.										
SIGNATURE .	Signature, typed or printed name of registered agent and	title if applicable. (NOTE:	: Registered Agent	gnature require	id when remistating)	-	DATE			
		• Election Com		-			Maka ahash sasishia			
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Cam Trust Fund Ca			\$5.00 May Be Added to Fees		Make check payable orlda Department of S			
10.	OFFICERS AND DIREC	TORS	11.		ADDITIONS/CHANG	ES TO OFFIC	ERS AND DIRECTORS I	N 10		
TITLE	D	☐ Delete	NTLE				Change	☐ Addition		
NAME	STIFFLER, DON	u 6	NAME STORE ADDR							
STREET ADORESS CITY-ST-ZIP	200 PENSACOLA BEACH ROAD, & GULF BREEZE, FL 32561	·L-0	STREET ADDR	322						
TITLE	PD -	☐ Delete	TITLE				Change	Addition		
NAME	COMMER, JAKE	L Delete	NAME	İ						
STREET ADDRESS	200 PENSACOLA BEACH ROAD,	F-6	STREET ADOR	223						
CITY-ST-ZIP		, <u>, , , , , , , , , , , , , , , , , , </u>	CITY-SI-ZIP			_				
TITLE	TD	☐ Defete	TITLE	-			Change	☐ Addition		
NAME CITIETT ADDRESS	BELCHER, MARGARET 200 PENSACOLA BEACH ROAD, I	/ 2	NAME STREET ADDR							
STREET ADDRESS CITY-ST-ZIP	GULF BREEZE, FL. 32561	(-3	CITY-ST-ZIP							
TITLE	D	☐ Delete	TITLE				☐ Change	Addition		
NAME	MCFADDEN, NORMAN		NAME	1				_		
STREET ADDRESS	200 PENSACOLA BEACH ROAD, (C-2	STREET ADDR	ESS						
CITY-ST-ZIP	GULF BREEZE, FL 32561		CITY-ST-ZIP							
TITLE	VPD	☐ Delete	TITLE	İ			Change	Addition		
NAME CTREET ADDRESS	FAIR, DUANE 200 PENSACOLA BEACH ROAD, .	La	NAME STREET ADOR	199						
STREET ADDRESS CITY+ST-ZIP	GULF BREEZE, FL 32561	r -1	CITY-ST-ZIP							
TITLE	SD	Delete	TITLE	5₽				Addition		
NAME	LAUER, SISSY		NAME	20	reller, 5	1554	\(\frac{1}{2}\)			
STREET ADDRESS	200 PENSACOLA BEACH RD F-1		STREET ADDR	ESS	/	,				
CITY-ST-7IP	GULE BREEZE EL 32561		CITY-ST-ZIP	1						

12. Thereby 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: SIGNATURE AND TYRED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR