

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H78697

FILED
Jan 11, 2011
Secretary of State

Entity Name: "PLACE IN THE SUN" RESIDENT'S CORPORATION

Current Principal Place of Business:

4426 TUCKER SQUARE
NEW PORT RICHEY, FL 346524835

New Principal Place of Business:

Current Mailing Address:

4426 TUCKER SQUARE
NEW PORT RICHEY, FL 346524835

New Mailing Address:

FEI Number: 59-2770277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, LAWRENCE G
4416 TUCKER SQ
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

WESTLING, VAL J
4469 TUCKER SQ
NEW PORT RICHEY, FL 34652 US

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: VAL WESTLING

01/11/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: WESTLING, VAL J
Address: 4469 TUCKER SQUARE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP
Name: DESMARAIS, BEA
Address: 4408 TUCKER SQUARE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D
Name: BARNES, JERRY
Address: 4426 TUCKER SQ
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S
Name: BELKOWSKI, THOMAS
Address: 4401 TUCKER SQ
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D
Name: JONES, BARBARA
Address: 4443 TUCKER SQ
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: T
Name: NESBITT, MILTON
Address: 4426 TUCKER SQUARE
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VAL WESTLING

PRES

01/11/2011

Electronic Signature of Signing Officer or Director

Date