

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J01917** (0)
1. Corporation Name
SUNSET LAKE PARK RESIDENTS ASSOCIATION, INC.



Principal Place of Business
**2520 SUNSET POINT RD.
LOT #9
CLEARWATER FL 34625**

Mailing Address
**2520 SUNSET POINT RD.
LOT #47
CLEARWATER FL 34625
US**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
02/28/1986

4. FEI Number
59-2644941

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

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
**EVERER, ADA
2520 SUNSET POINT RD #47
CLEARWATER FL 34625**

10. Name and Address of New Registered Agent
81 Name
DOROTHY BRITTAIN
82 Street Address (P.O. Box Number is Not Acceptable)
2520 SUNSET PT RD # 86
83
CLEARWATER FL 33765
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0503, Florida Statutes.

SIGNATURE **DOROTHY L. BRITTAIN** *Dorothy L. Brittain Sec/Treas. 4-4-98*
Signature, typed or printed name of registered agent and title if applicable (NOT: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	HERMAN, MARGARET	
STREET ADDRESS	2520 SUNSET PT. RD. #9	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	EVERER, FRANK	
STREET ADDRESS	2520 SUNSET PT. RD #47	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	EVERER, ADA	
STREET ADDRESS	2520 SUNSET PT. RD #47	
CITY-ST-ZIP	CLEARWATER FL 34625	
TITLE	BM	<input checked="" type="checkbox"/> DELETE
NAME	TOLBERT, MAJOR	
STREET ADDRESS	2520 SUNSET PT. RD. #30	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BRITTAIN, EUGENE	
STREET ADDRESS	2520 SUNSET POINT RD #86	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GIBSON, JEAN	
STREET ADDRESS	2520 SUNSET PT. RD. #54	
CITY-ST-ZIP	CLEARWATER FL 34625	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	EUGENE BRITTAIN	
1.3 STREET ADDRESS	2520 SUNSET PT. RD #86	
1.4 CITY-ST-ZIP	CLEARWATER FL 33765	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	ST	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	DOROTHY BRITTAIN	
3.3 STREET ADDRESS	2520 SUNSET PT. RD #86	
3.4 CITY-ST-ZIP	CLEARWATER FL 33765	
4.1 TITLE	BM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	JOSEPH MASSARO	
4.3 STREET ADDRESS	2520 SUNSET PT. RD #36	
4.4 CITY-ST-ZIP	CLEARWATER FL 33765	
5.1 TITLE	BM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	LILLIAN JUMP	
5.3 STREET ADDRESS	2520 SUNSET PT. RD #21	
5.4 CITY-ST-ZIP		
6.1 TITLE	BM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	J. D. SANDERS	
6.3 STREET ADDRESS	2520 SUNSET PT. RD #100	
6.4 CITY-ST-ZIP		

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Dorothy L. Brittain* *Dorothy L. Brittain* 3-10-98 813-749-1917

CR2E034 (10/97)