

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001664

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** SUNSET ESTATE HOMEOWNERS ASSOCIATION OF PENSACOLA, INC.

**Current Principal Place of Business:**

CENTRE GROUP PROPERTIES, INC.  
4400 BAYOU BLVD. STE 35  
PENSACOLA, FL 325036

**New Principal Place of Business:**

**Current Mailing Address:**

4400 BAYOU BLVD.  
SUITE 35  
PENSACOLA, FL 32503

**New Mailing Address:**

**FEI Number:** 59-3664745

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LONGWELL, TINA R  
4400 BAYOU BLVD.  
SUITE 35  
PENSACOLA, FL 32503 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: DP ( ) Delete  
Name: PALMER, FRANK  
Address: 6222 SUNTAN CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

Title: DV ( ) Delete  
Name: ROGERS, GEORGE  
Address: 6036 SUNTAN CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

Title: DS ( ) Delete  
Name: MCNEIL, TIM  
Address: 6037 SUNTAN CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

Title: DT (X) Delete  
Name: GRAMO, CHERYL  
Address: 6223 SUNTAN CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

Title: D (X) Delete  
Name: BRUNNER, DIETER  
Address: 6183 SUNTAN CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: GLENNON, TIM  
Address: 6192 SUNTAN CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

Title: VP (X) Change ( ) Addition  
Name: JONES, JUDY  
Address: 6138 SUNTAN CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

Title: TRS (X) Change ( ) Addition  
Name: LENN, ELIZABETH  
Address: 6198 SUNTAN CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

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 Chapter 119, 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: TIM GLENNON

PRES

04/30/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date