2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001664

FILED Apr 30, 2007 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: CENTRE GROUP PROPERTIES, INC. 4400 BAYOU BLVD. STE 35 PENSACOLA, FL **New Mailing Address: Current Mailing Address:** 4400 BAYOU BLVD. SUITE 35 PENSACOLA, FL 32503 FEI Number: 59-3664745 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LONGWELL, TINA R 4400 BAYOU BLVD. SUITE 35 PENSACOLA, FL 32503 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete (X) Change () Addition GLENNON, TIM JONES, JUDY Name: Name: 6192 SUNTAN CIRCLE Address: 6138 SUNTAN CIRCLE Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526 Title: Title: (X) Change () Addition () Delete JONES, JUDY Name: JONES, SANDY Name: Address: 6138 SUNTAN CIRCLE Address: 6195 SUNTAN CIRCLE City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526 Title: TRS () Delete Title: TRS (X) Change () Addition LENN, ELIZABETH RODABAUGH, TREVOR Name: Name: Address: 6198 SUNTAN CIRCLE Address: 6153 SUNTAN CIRCLE City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526 Title: Title: DS () Change (X) Addition () Delete ALONSO, LINDA Name: Name: Address: Address: 6120 SUNTAN CIRCLE City-St-Zip: City-St-Zip: PENSACOLA, FL 32526 Title: () Delete Title: () Change (X) Addition WEBSTER, JIM Name: Name: 6204 SUNTAN CIRCLE Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32526 () Change (X) Addition Title: () Delete Title: MCNEIL. TIM Name: Name: Address: Address: 6037 SUNTAN CIRCLE PENSACOLA, FL 32526 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JUDY JONES DP 04/30/2007