

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002638

FILED  
Jul 07, 2008  
Secretary of State

**Entity Name:** SUNSET COTTAGES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1114 SANTA ROSA BLVD.  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 8057  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

**FEI Number:** 59-3652699      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LANG, KIM  
806 PINE ST  
DESTIN, FL 32541      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: P      ( ) Delete  
Name: MCCLELLAND, MARC  
Address: 126 ROYAL TROON  
City-St-Zip: CIBOLO, TX 78108

Title: 1VP      ( ) Delete  
Name: ALEXANDER, PENNY  
Address: 207 BLACK DR  
City-St-Zip: ST. PETERS, MO 63376

Title: S      ( ) Delete  
Name: PHILLIPS, TRUDY  
Address: 8440 LANEWOOD CIR  
City-St-Zip: LEEDS, AL 35094

Title: TRES      ( ) Delete  
Name: LANG, KIM  
Address: 806 PINE ST  
City-St-Zip: DESTIN, FL 32541

Title: 2VP      ( ) Delete  
Name: RITTER, DAVID  
Address: 1997 DEVMOR CT #2C  
City-St-Zip: FORT WALTON BEACH, FL 32548

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: KIM LANG

TRES

07/07/2008

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

\_\_\_\_\_  
Date