

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2008 08:00 AM
Secretary of State

DOCUMENT # N01000006505

1. Entity Name
**GREATER SUN CITY, CENTER FL CHAPTER,
SPEBSQSA, INC.**



Principal Place of Business
**12939 PRESTWICK DR
RIVERVIEW, FL 33569-7012**

Mailing Address
**12939 PRESTWICK DR
RIVERVIEW, FL 33569-7012**



01152008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
91-2122273

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HAAS, PHILLIP E
12939 PRESTWICK DR
RIVERVIEW, FL 33569-7012**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000832421
02/27/08-80059-004 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
DOMROES, DAVID
2111 STERLING GLEN COURT
SUN CITY CENTER, FL 33573**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
PAULSON, RICHARD
1249 HUNINGTON GREEN DR
SUN CITY BEACH, FL 33573**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
CODNER, RAYMOND
2512 LANCASTER DR.
SUN CITY CENTER, FL 33573**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
HAAS, PHILLIP E
12939 PRESTWICK DR
RIVERVIEW, FL 335697012**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LANG, ROBERT
941 VILLEROY GREENS DR
SUN CITY CENTER, FL 33573**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
PETERSEN, ERIC
18102 PRAIRIE WOLF GLEN
SUN CITY CENTER, FL 33573**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Phillip E. Haas
Phillip E. Haas

Jan 19, 2008

813-677-8448

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #