

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01233

FILED
Feb 13, 2009
Secretary of State

Entity Name: SUN VIEW BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1850 BOY SCOUT DRIVE
STE 103
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

1850 BOY SCOUT DRIVE
STE 103
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0739038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYNOLDS, MARK A
1850 BOY SCOUT DRIVE
STE. 104
FT MYERS, FL 33907 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: PD () Delete
Name: KENNEDY, TOM
Address: 1860 BOY SCOUT DR, STE 207
City-St-Zip: FORT MYERS, FL 33907

Title: VP () Delete
Name: TINSON, LORI
Address: 1860 BOY SCOUT DR STE 205
City-St-Zip: FORT MYERS, FL 33907

Title: SD () Delete
Name: WEBB, MARK R
Address: 1850 BOY SCOUT DR SUITE 101
City-St-Zip: FORT MYERS, FL 33907

Title: TD () Delete
Name: REYNOLDS, MARK
Address: 1850 BOY SCOUT DR SUITE 101
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: PERSONNETT, HAP
Address: 1860 BOYSCOUT DR #209
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: DUNN, KERI
Address: 1850 BOY SCOUT DR STE 104
City-St-Zip: FORT MYERS, FL 33907

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:

Title: D (X) Change () Addition
Name: MENDENHALL, DWAYNE
Address: 1850 BOY SCOUT DR STE 109
City-St-Zip: FORT MYERS, FL 33907

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: MARK REYNOLDS

TD

02/13/2009

Electronic Signature of Signing Officer or Director

Date