2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008 8:00 am
Secretary of State
02-08-2008 90024 005 ****61.25

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1. Entity Name
SUNNYSIDE MOBILE HOME OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5028 FISHER STREET ZEPHYRHILLS, FL 33541	5137 FISHER STREET ZEPHYRHILLS, FL 33541

01172008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1 WIDENER LANE	5123 IDYLL LANE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ZEPHYRHILLS, FL	City & State: ZEPHYRHILLS, FL.
Zip: 33541 Country: USA	Zip: 33541 Country: USA

4. FEI Number: 59-2368060 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LASTOWSKI, GEORGE R 5116 MOON STREET ZEPHYRHILLS, FL 33541	Name: JANET V. EICHENBERGER Street Address (P.O. Box Number is Not Acceptable): 5123 IDYLL LANE City: ZEPHYRHILLS FL Zip Code: 33541

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: JANET V. EICHENBERGER Janet V. Eichenberger 2-6-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MOSS, RON 5137 FISHER ST ZEPHYRHILLS, FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D EICHENBERGER, JANET V. 5123 IDYLL LANE ZEPHYRHILLS, FLORIDA 33541	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP NELLIGA, CONSTANCE 5143 FISHER ST ZEPHYRHILLS, FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP NELLIGAN, CONSTANCE (CORRECTION OF LAST NAME)	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LASTOWSKI, GEORGE R 5116 MOON STREET ZEPHYRHILLS, FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LASTOWSKI, GEORGE R 5116 MOON STREET ZEPHYRHILLS, FLORIDA 33541	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MCFARLAND, GLENDA 5047 DAISY ST ZEPHYRHILLS, FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOURNIER, JUDY 5128 REDWING STREET ZEPHYRHILLS, FLORIDA 33541	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEIM, JOANNA L 5135 REDWING ST ZEPHYRHILLS, FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAHN, JIM 5131 FISHER STREET NORTH ZEPHYRHILLS, FLORIDA 33541	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLICK, ELSIE 5103 DAISY ST. S ZEPHYRHILLS, FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AUGUSTAT, WALTER 5041 PENINSULA ST. SOUTH ZEPHYRHILLS, FL 33541	☐ Change ☑ Addition

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: JANET V. EICHENBERGER Janet V. Eichenberger 2-6-08 813-778-6347
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #