

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003112

FILED
Apr 24, 2012
Secretary of State

Entity Name: SUNRISE LAKES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O LELAND MANAGEMENT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

C/O LELAND MANAGEMENT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 32-0096216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MANAGEMENT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 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
Name: GAWRON, WILLIAM
Address: 6972 LAKE GLORIA BLVD
City-St-Zip: ORLANDO, FL 32809

Title: VP
Name: DOWNS, WILLIAM
Address: 6972 LAKE GLORIA BLVD
City-St-Zip: ORLANDO, FL 32809

Title: S
Name: DAPBUS, JOHN
Address: 6972 LAKE GLORIA BLVD
City-St-Zip: ORLANDO, FL 32809

Title: T
Name: WILKINS, CHERYL
Address: 6972 LAKE GLORIA BLVD
City-St-Zip: ORLANDO, FL 32809

Title: D
Name: COX, THOMAS
Address: 6972 LAKE GLORIA BLVD
City-St-Zip: ORLANDO, FL 32809

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM GAWRON

P

04/24/2012

Electronic Signature of Signing Officer or Director

Date