

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004890

FILED  
Apr 20, 2006  
Secretary of State

Entity Name: SUNSET RIDGE HOA, INC.

**Current Principal Place of Business:**

107 N. LINE DR.  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

107 N. LINE DR.  
APOPKA, FL 32703 US

**New Mailing Address:**

FEI Number: 02-0623192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SUTHERLAND, THERESA D  
107 N. LINE DR.  
APOPKA, FL 32703 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: KIRWAN, GLENN  
Address: 12001 SCIENCE DR STE 160  
City-St-Zip: ORLANDO, FL 32826 US

Title: VD ( ) Delete  
Name: TORO, MAGGIE  
Address: 12001 SCIENCE DR STE 160  
City-St-Zip: ORLANDO, FL 32826 US

Title: STD ( ) Delete  
Name: WOFFORD, KEN  
Address: 12001 SCIENCE DR STE 160  
City-St-Zip: ORLANDO, FL 32826 US

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

Title: PD (X) Change ( ) Addition  
Name: BAILEY, LINDA  
Address: 550 COTSWOLD CIRCLE  
City-St-Zip: DAVENPORT, FL 33837 US

Title: VD (X) Change ( ) Addition  
Name: HOFFNER, JASON  
Address: 142 COTSWOLD CIRCLE  
City-St-Zip: DAVENPORT, FL 33837 US

Title: STD (X) Change ( ) Addition  
Name: CARR, JOSEPH  
Address: 313 MADINA CIRCLE  
City-St-Zip: DAVENPORT, FL 33837 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA BAILEY

PD

04/20/2006

Electronic Signature of Signing Officer or Director

Date