## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 30, 2007 8:00 am Secretary of State

DOCUMENT # N0300005301  1. Entity Name SUNSET CAY LAKES CONDOMINIUM 1600 ASSOCIATION, INC.					(	04-30-200	7 90469	037 ****6	1.25
Principal Plac 834 BALD E MARCO ISLA		Mailing Address 834 BALD EAGLE DR. MARCO ISLAND, FL 3414	5		1 (\$8)//8( B)/ B8/B	s IIIII esiik sskii s	Tin 8841 87181	BHYB 11111 8 2161 119	1tt 21 04 1001
Principal Place of Business - No P.O. Box #     3. Ma		3. Mailing Address	Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		03282007 <sub>C</sub>	hg-NP	CR2E(	37 (12/06)	
City & State		City & State	City & State		4. FEI Number 20-275240	05		<u> </u>	oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of S	itatus Desired		\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent			7. Name and Ad	dress of New	Registered	Agent	
ROSENOW, ROBERT									
834 BALD	EAGLE DR. SLAND, FL 34145		Street Address		P.O. Box Number is	Not Acceptat	ole)		
115 (1 (00 ))	5E (10,1 E 04,40								
			City				FI	Zip Code	е
	named entity submits this statement fi tions of registered agent.	or the purpose of changing its req	gistered office or	r register	ed agent, or both, in	n the State of F	Florida. I an	n familiar with,	and accept
SIGNATURE									
Lakinalure									
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable, (NOTE: Re	egistered Agent signat	ure required	when reinstating)		DATE		
SIGNATURE	Filing Fee is \$61.25	9. Election Campa Trust Fund Cor	aign Financing	sure required	\$5.00 May Be Added to Fees	1	Make che	ck payable to	
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campa Trust Fund Con	aign Financing		\$5.00 May Be Added to Fees	Fle	Make cheo orida Depa	rtment of St	tate
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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: .

GaryBeck 4/15/201

Daytime Phone #