

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90376 010 ****61.25

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1. Entity Name
**SUN RIDGE VILLAGE PROPERTY OWNERS
ASSOCIATION, INC.**



Principal Place of Business
**208 W ALAMO DR
LAKELAND, FL 33813-1503**

Mailing Address
**208 W ALAMO DR
LAKELAND, FL 33813-1503**

2. Principal Place of Business - No P.O. Box #

5018 Greenbrook Ln

3. Mailing Address

Suite, Apt. #, etc.

City & State
Lakeland FL

City & State

Zip
33811

Country
US

Zip

Country

03052007

Chg-NP

CR2E037 (12/06)

4. FEI Number
20-0130030

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HARPER, ROBERT F III
208 W ALAMO DR
LAKELAND, FL 33813-1503**

7. Name and Address of New Registered Agent

Name
Kay Elliott

Street Address (P.O. Box Number is Not Acceptable)

5018 Greenbrook Ln

Lakeland

City

FL

Zip Code

33811

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2007**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
HARPER, ROBERT F
208 W ALAMO DR
LAKELAND, FL 338131503** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVT
ELLSWORTH-YELNICK, SUZANNE
208 W ALAMO DR
LAKELAND, FL 338131503** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
REEBER, CHARLES H
50-2 BRECKENRIDGE PKWY STE B
TAMPA, FL 33610** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
Rebecca Champney
6052 Kaley Dr
Winter Haven FL 33880** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
Curtis Williams
6030 Kaley Dr
Winter Haven FL 33880** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
John Hozegood
6026 Kaley Dr
Winter Haven 33880** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
Kiauna Brown
817 Sunridge Village Dr
Winter Haven FL 33880** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Dave Beach
6044 Kaley Dr
Winter Haven FL 33880** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

S. Rebecca Champney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/05/07

Date

863-229-1036

Daytime Phone