

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010563

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** COMMUNITY FOUNDATION OF GREATER SUN CITY CENTER, INC.

**Current Principal Place of Business:**

550 NORTH REO STREET SUITE 301  
LMOCK@CFTAMPABAY.ORG  
TAMPA, FL 336091037

**New Principal Place of Business:**

550 NORTH REO STREET SUITE 301  
TAMPA, FL 336091037 US

**Current Mailing Address:**

550 NORTH REO STREET SUITE 301  
TAMPA, FL 336091037

**New Mailing Address:**

550 NORTH REO STREET SUITE 301  
TAMPA, FL 336091037 US

**FEI Number:** 59-3001853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FISCHER, DAVID J  
550 NORTH REO STREET SUITE 301  
TAMPA, FL 336091037 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: CD  
Name: LUNSFORD, EVELYN  
Address: 550 NORTH REO STREET SUITE 301  
City-St-Zip: TAMPA, FL 336091037 US

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: DAVID J. FISCHER

PRES

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date