## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## FILED Feb 15, 2007 8:00 am Secretary of State

02-15-2007 90039 003 \*\*\*\*61.25

DOCL	JMENT	# N	03143
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SUNRUNNER PLACE CONDOMINIUM ASSOCIATION. INC.



Principal Place of Business

PRESTIGE PROPERTIES OF PENSACOLA, INC.

528 W. GARDEN ST. SUITER

Mailing Address

PRESTIGE PROPERTIES OF PENSACOLA, INC 528 W. GARDEN ST. SUITER

40017724

PENSACOLA, FL 32502 PENSACOLA, FL 32502 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092007 Cha-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-2427438 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NYLUND, C.J. PRESTIGE PROPERTIES OF PENSACOLA, INC. Street Address (P.O. Box Number is Not Acceptable) 528 W. GARDEN ST. STE 2 PENSACOLA, FL 32502 Zip Code FL 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 little if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 THLE ☐ Delete TITLE ☐ Channe Addition Calder GUNN, GLENN charla NAME NAME 7171 N. 9th aue 7171 N. 9TH AVE C7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32504 CITY-ST-ZIP <u>Pensacola</u> 32504 TITLE Delete TITLE DChange Addition TURNAGE, LISA NAME Zarahn NAME 7171 H 94 aire STREET ADDRESS 7171 N. 9TH AVE F8 STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32504 CITY-ST-ZIP F1 32504 Pensacola TITLE Delete TITLE Change Addition PERSELL, DIANE NAME Fourd STREET ADDRESS 6260 WINDWOOD DRIVE 2171 N.9th STREET ADDRESS am C8 CITY-ST-ZIP PENSACOLA, FL 32504 CITY-ST-ZIP 32504 TITLE ☐ Delete TITLE  $\sigma$ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS 11 pl. 9th aue G. CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME Jim Taylor Our STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Sec Trea. TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME HENriedta STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Pensacola

12. I hereby certify that the information supplied with this filling 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:

SNATURE AND CYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #