

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007794

FILED
Apr 15, 2009
Secretary of State

Entity Name: SUNRISE SPORTS FOUNDATION, INC.

Current Principal Place of Business:

216 HILLCREST DR
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

17900 GULF BLVD.
16D
REDINGTON SHORES, FL 33708

New Mailing Address:

FEI Number: 30-0275413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALUMBO, ALFRED J
216 HILLCREST DR
SAFETY HARBOR, FL 34695 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: DP () Delete
Name: PALUMBO, ALFRED J
Address: 216 HILLCREST DR
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DV () Delete
Name: LOOK, RAY
Address: 1736 RANCHWOOD DR
City-St-Zip: DUNEDIN, FL 34698

Title: DST () Delete
Name: LINDSAY, MARJORIE
Address: 2391 SUMATRAN WAY #5
City-St-Zip: CLEARWATER, FL 33763

Title: C () Delete
Name: WILLIAMS, NAHED M
Address: 17900 GULF BLVD, # 16D
City-St-Zip: REDINGTON SHORES, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NAHED M. WILLIAMS

CONT

04/15/2009

Electronic Signature of Signing Officer or Director

Date