

ANNUAL REPORT

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # N05000000584

1. Entity Name
SUNSET BREEZE IRB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**802 BEACH TRAIL
 UNIT 301
 INDIAN ROCKS BEACH, FL 33785**

Mailing Address
**802 BEACH TRAIL
 UNIT 301
 INDIAN ROCKS BEACH, FL 33785**



01252007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**YANGCO, BENNY G
 1705 COTTAGE WAY COURT
 BRANDON, FL 33510**

**DO NOT WRITE
 IN THIS SPACE**

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 \$61.25
 Due by May 1, 2007**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	YANGCO, JADWIGA M
STREET ADDRESS	802 BEACH TRAIL, UNIT #301
CITY-ST-ZIP	INDIAN ROCKS BEACH, FL 33785
TITLE	VD
NAME	YANGCO, BIENVENIDO G
STREET ADDRESS	802 BEACH TRAIL, UNIT #301
CITY-ST-ZIP	INDIAN ROCKS BEACH, FL 33785
TITLE	STD
NAME	YANGCO, JADWIGA M
STREET ADDRESS	802 BEACH TRAIL, UNIT #301
CITY-ST-ZIP	INDIAN ROCKS BEACH, FL 33785
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 01/31/07-80007-018 61.25

**DO NOT WRITE
 IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jadwiga M. Yangco 1/24/07 (813) 875-7024
 Daytime Phone #