

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004503

FILED
May 24, 2009
Secretary of State

Entity Name: SUNSHINE I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4632 SE 5TH PLACE
CAPE CORAL, FL 33904

New Principal Place of Business:

4632 SE 5TH PLACE
#9
CAPE CORAL, FL 33904

Current Mailing Address:

4632 SE 5TH PLACE
CAPE CORAL, FL 33904

New Mailing Address:

4632 SE 5TH PLACE
#9
CAPE CORAL, FL 33904

FEI Number: 59-2529503 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MIKOLASHEK, ROBERT
4632 SE 5TH PLACE
SUITE 8
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

VELTE, PAUL
4632 SE 5TH PLACE
SUITE 7
CAPE CORAL, FL 33904 US

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: PAUL VELTE

05/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIKOLASHEK, ROBERT
Address: 4632 SE 5TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: ST () Delete
Name: HUTH, SUE
Address: 4632 SE 5TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: V () Delete
Name: VELTE, SANDEA
Address: 4632 SE 5TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: VELTE, PAUL
Address: 4632 SE 5TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: ST (X) Change () Addition
Name: HUTH, SUE
Address: 4632 SE 5TH PLACE #9
City-St-Zip: CAPE CORAL, FL 33904

Title: V.P. (X) Change () Addition
Name: MIKOLASHEK, ROBERT C
Address: 4632 SE 5TH PLACE #8
City-St-Zip: CAPE CORAL, FL 33904

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: PAUL VELTE

PRES

05/24/2009

Electronic Signature of Signing Officer or Director

Date