

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jun 07, 2006 8:00 am
Secretary of State

04-27-2006 90178 036 ****61.25

DOCUMENT # N05000011406 1. Entity Name SUNGLO HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business 404 JENKS AVE PANAMA CITY, FL 32401		Mailing Address 404 JENKS AVE PANAMA CITY, FL 32401	
2. Principal Place of Business 941 LIGHTHOUSE LAGOON CT		3. Mailing Address 941 LIGHTHOUSE LAGOON CT	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State PANAMA CITY BEACH, FL		City & State PANAMA CITY BEACH, FL	
Zip 32407		Zip 32407	
Country 		Country 	
6. Name and Address of Current Registered Agent GIOIELLO, JOHN L ESQ 404 JENKS AVE PANAMA CITY, FL 32401		7. Name and Address of New Registered Agent Name DEBORAH L. DAVIS Street Address (P.O. Box Number is Not Acceptable) 941 LIGHTHOUSE LAGOON CT City PANAMA CITY BEACH FL Zip Code 32407	
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 <u><i>Deborah L Davis</i></u> DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHICK, MARTIN J JR 1962 CENTERVILLE RD TALLAHASSEE, FL 32308	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVST DAVIS, JERRY G 1962 CENTERVILLE RD TALLAHASSEE, FL 32308	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MONEY, MICHAEL W 1962 CENTERVILLE RD TALLAHASSEE, FL 32308	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP DAVIS, DEBORAH L 941 LIGHTHOUSE LAGOON CT PANAMA CITY BEACH, FL 32406	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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: <u><i>Deborah L Davis</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>4-12-06</u> Daytime Phone # <u>850-819-9600</u>	