

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 15, 2010
Secretary of State**

DOCUMENT# N06000003132

Entity Name: SULLIVAN RANCH HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8695 COLLEGE PARKWAY
1274
FT. MYERS, FL 33919**New Principal Place of Business:**5728 MAJOR BOULEVARD
502
ORLANDO, FL 32819**Current Mailing Address:**8695 COLLEGE PARKWAY
1274
FT. MYERS, FL 33919**New Mailing Address:**5728 MAJOR BOULEVARD
502
ORLANDO, FL 32819**FEI Number:** 51-0567619**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**OMNI MANAGEMENT SERVICES
8695 COLLEGE PARKWAY
1274
FT. MYERS, FL 33919 US**Name and Address of New Registered Agent:**KAREN WONSETLER, PA
860 N. ORANGE AVENUE
135
ORLANDO, FL 32801 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: KAREN WONSETLER

11/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DP/T
Name: MAPILI, BERNIE
Address: 2301 LUCIEN WAY, STE. 400
City-St-Zip: MAITLAND, FL 32751Title: DVP
Name: SMITH, ADAM
Address: 2301 LUCIEN WAY, STE. 400
City-St-Zip: MAITLAND, FL 32751Title: DS
Name: CHOMA, DEBRA
Address: 2301 LUCIEN WAY, STE. 400
City-St-Zip: MAITLAND, FL 32751

I hereby 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 all other like empowered.

SIGNATURE: BERNIE MAPILI

DP/T

11/15/2010

Electronic Signature of Signing Officer or Director

Date