

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED AND FILED

65-0012573

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
300 PALM BEACH BLVD.
TALLAHASSEE, FLORIDA 32399-0001

DOCUMENT # **N06108 (7)**
1. Corporation Name
SUN LAKE VILLAS COMMUNITY ASSOCIATION, INC.

Principal Place of Business: **C/O MARILYN MORGAN 2432 ST. DAVID ISLE COURT PUNTA GORDA FL 33950 US**
Mailing Address: **C/O MARILYN MORGAN 2432 ST. DAVID ISLE COURT PUNTA GORDA FL 33950 US**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified: **11/09/1984** 3a. Date of Last Report: **07/29/1994**
4. FID Number: **65-0012573** Applied For: Not Applicable:
5. Certificate of Global Report: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
7. Nonprofit with 501(c)(3) Status: **\$68.75 Supplemental Fee Not Required**
8. This corporation has had, for any year for which it was a corporation, a change of state: Yes No

2. Principal Place of Business: **21** 2a. Mailing Address: **26**
3. State: **22** 3a. State: **27**
4. City: **23** 4a. City: **28**
5. ZIP: **24** 5a. ZIP: **25** 6. ZIP: **29** 6a. ZIP: **30**

9. Name and Address of Current Registered Agent
**MORGAN, MARILYN
2432 ST. DAVID ISLE COURT
PUNTA GORDA FL 33950**

10. Name and Address of New Registered Agent
B1 Name: _____
B2 Street Address (P.O. Box Number is Not Acceptable): _____
B3 City: _____
B4 State: **FL** B5 Zip Code: _____

11. Purpose for the preparation of this report is to comply with the Florida Statutes. The above information is submitted for the purpose of changing the registered office of the corporation or to file an annual report or to file a report on the corporation's financial condition. The corporation is required to file this report on or before the specified date. Failure to file this report on or before the specified date may result in the corporation being deemed to have abandoned its Florida domicile.

SIGNATURE: *Marilyn Morgan* DATE: **4/26/95**

12. NAME	13. ADDRESS	14. CITY	15. STATE	16. ZIP
ST MORGAN, MARILYN 2432 ST. DAVID ISLE COURT PUNTA GORDA FL				
DP MORGAN, WILLIAM 2432 ST DAVID ISLAND CT PUNTA GORDA FL				
DV THOMAS, JOHN 2210 COOPER STREET, #D3 PUNTA GODA FL				
DV HAGER, PATRICIA 25030 AIRPORT ROAD, B-2 PUNTA GORDA FL				
D DANELLA, G. EDWARD 2210 COOPER ST., F-2 PUNTA GORDA FL				

14. I, the undersigned, certify that the information supplied with this filing was voluntarily furnished and is true and correct for the reporting period stated in this report. I further certify that the information included on this annual report or supplemental annual 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 name of the officer or director is provided for on the report as required by Chapter 117, Florida Statutes, and that my name appears in Block 12 or Block 13 of the foregoing table as an officer or director.

SIGNATURE: *Marilyn Morgan* SECRETARY/TREASURER 4/26/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (813)639-5920