

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN - 2 11 0:14

DOCUMENT # NO6620 (1)

1. Corporation Name

THE HOMEOWNERS' ASSOCIATION OF THE SUNRISE GOLF CLUB ESTATES, INC.

Principal Place of Business

Mailing Address

5718 TAM O'SHANter CT.
SARASOTA FL 34238

5718 TAM O'SHANter CT.
SARASOTA FL 34238

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/13/1984

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2494004

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

2a. Mailing Address

21 5712 Tam O'Shanter Cr

26 5712 Tam O'Shanter Ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 -

27 -

City & State

City & State

23 Sarasota, FL

28 Sarasota, FL

24 Zip 34238

Country USA

29 Zip 34238

Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUNT, BARBARA J
5718 TAM O'SHANter CT.
SARASOTA FL 34238

81 Name

Joe Swift

82 Street Address (P.O. Box Number is Not Acceptable)

5712 Tam O'Shanter Ct.

83

84 City

Sarasota,

FL

85 Zip Code

34238

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent's signature required when reappointing)

May 24, 1995

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	HUNT, BARBARA J
STREET ADDRESS	5718 TAM O'SHANter CT.
CITY - ST - ZIP	SARASOTA FL 34238
TITLE	VD
NAME	SWIFT JOSEPH
STREET ADDRESS	5712 TAM O'SHANter CT.
CITY - ST - ZIP	SARASOTA FL 34238
TITLE	SD
NAME	ANDERSON, DARLENE
STREET ADDRESS	6137 APPROACH RD.
CITY - ST - ZIP	SARASOTA FL 34238
TITLE	TD
NAME	BEUSMAN NELLIE
STREET ADDRESS	6038 APPROACH WAY
CITY - ST - ZIP	SARASTA FL 34238
TITLE	D
NAME	BAILEY JOHN H.
STREET ADDRESS	5781 AUGUSTA CIRCLE
CITY - ST - ZIP	SARASOTA FL 34238
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11 TITLE	PD	☐ Change ☐ Addition
12 NAME	Bailey, John H.	
13 STREET ADDRESS	5781 Augusta Circle	
14 CITY - ST - ZIP	Sarasota, FL 34238	
21 TITLE	STD	☐ Change ☐ Addition
22 NAME	Swift, Joseph	
23 STREET ADDRESS	5712 Tam O'Shanter Ct	
24 CITY - ST - ZIP	Sarasota, FL 34238	
31 TITLE	D	☐ Change ☐ Addition
32 NAME	D'Alberto, Anne	
33 STREET ADDRESS	5709 Augusta Circle	
34 CITY - ST - ZIP	Sarasota, FL 34238	
41 TITLE	D	☐ Change ☐ Addition
42 NAME	Jennings, Chic	
43 STREET ADDRESS	5719 Firestone Ct.	
44 CITY - ST - ZIP	Sarasota, FL 34238	
51 TITLE	D	☐ Change ☐ Addition
52 NAME	Grimes, Bernie	
53 STREET ADDRESS	5729 Augusta Circle	
54 CITY - ST - ZIP	Sarasota, FL 34238	
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an amendment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5.24.95

DATE

(Type or Print Name)