2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# N08000011129

Entity Name: SUNVIEW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1011 NE 20TH AVENUE
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

1011 NE 20TH AVENUE
OCALA, FL 34470

New Mailing Address:

710 NE 17TH PLACE
OCALA, FL 34470

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUMPHRIES, WESLEY W
1011 NE 20TH AVENUE
OCALA, FL 34470 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: HUMPHRIES, WESLEY W
Address: 1011 NE 20TH AVENUE
City-St-Zip: OCALA, FL 34470

Title: VP ( ) Delete
Name: HUMPHRIES, JINA
Address: 1011 NE 20TH AVENUE
City-St-Zip: OCALA, FL 34470

Title: D ( ) Delete
Name: BYNUM, CAROL
Address: 2635 NE 7TH STREET, UNIT 104
City-St-Zip: OCALA, FL 34470

Title: D ( ) Delete
Name: HUMPHRIES, WESLEY W
Address: 1011 NE 20TH AVENUE
City-St-Zip: OCALA, FL 34470

Title: D ( ) Delete
Name: HUMPHRIES, JINA
Address: 1011 NE 20TH AVENUE
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: WESLEY W HUMPHRIES PST 03/25/2009
Electronic Signature of Signing Officer or Director — Date