2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

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DOCU 1. Entity Narr SUNRISE BEACH,				04-28-200	8 9 0404 0	32 ****6	1.25		
2294 OCEAN SHORE BLVD 229		Mailing Address 2294 OCEAN SHORE BL ORMOND BEACH, FL 32			1 1 4 0 11 (0 1 0 11 1		D = 111 B/S 21 5(B	INII AIRII BIB() BY	91#81 E1 4 E E1
Principal Place of Business - No P.O. Box # 3. No P.O. Box #		3. Mailing Address	. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		04162008	Chg-NP	CR2E	037 (12/06)	
City & State		City & State	City & State		4. FEI Number 59-2580			J	pplied For ot Applicable
.Zíp	Country	Zip	Country		5. Certificate of	of Status Desire	d 🖸	\$8.75 Ad Fee Require	Iditional ed
	6. Name and Address of Current R	Registered Agent			7. Name and a	Address of Nev	w Registered	Agent	
HILL, JEAN			Name						
2294 OCEAN SHORE BLVD #402 ORMOND BEACH, FL 32176			Street Ad		s (P.O. Box Number is Not Acceptable)				
			City			******		Zip Coo	de
9 The above	named antity submits this statement for	*h				1 d 20 - 1	FL	- '	
the obligation	named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office of	r registere	ed agent, or both	i, in the State of	Florida. I am	i familiar with	, and accept
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable, (NOTE:	Registered Agent signals	ure required v	when reinstating)		DATE		_
SIGNATURE		<u> </u>	Registered Agent signatu				DATE		
SIGNATURE	Signature, typed or printed name of registered agent and Filling Fee is \$61.25 Due by May 1, 2008	9. Election Camp	paign Financing		when reinstating) \$5.00 May Be Added to Fees		•	k payable t	
10.	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIRE	9. Election Camp Trust Fund Co	paign Financing ontribution.	□ ,	\$5.00 May Be Added to Fees DDITIONS/CHA	NGES TO OFFI	Make chec lorida Depa CERS AND D	rtment of S	tate
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10. Title Name Street address	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIRE P MCCARRON, ESTELLE 157 SHERIDAN AVE. LONGWOOD, FL 32750 V	9. Election Camp Trust Fund Co	paign Financing intribution. 11. THE NAME STREET ADDRESS	□ AI me ¬ 22aų	\$5.00 May Be Added to Fees DDITIONS/CHA TOM KE OCEAN	NGES TO OFFI	Make chec lorida Depa CERS AND D	rtment of S IRECTORS IN ☐ Change	tate
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING PRICER OR DIRECTOR

4/20/08

407- 334-

Daytime Phone #