

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10381

FILED
Apr 01, 2009
Secretary of State

Entity Name: SANS SOUCI SUNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4616 LAFAYETTE AVE
SEBRING, FL 338755219

New Principal Place of Business:

Current Mailing Address:

4616 LAFAYETTE AVE
SEBRING, FL 338755219

New Mailing Address:

FEI Number: 59-2604846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POELSTRA, STANLEY W
4616 LAFAYETTE AVE
SEBRING, FL 33875 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: D () Delete
Name: KUNNECKE, ELIZABETH
Address: 4620 LAFAYETTE AVE.
City-St-Zip: SEBRING, FL 33875

Title: D () Delete
Name: HOFFMAN, JANET
Address: 4614 LAFAYETTE AVE.
City-St-Zip: SEBRING, FL 33872

Title: D () Delete
Name: POELSTRA, NANCY K
Address: 4616 LAFAYETTE AVE
City-St-Zip: SEBRING, FL 33872

Title: D () Delete
Name: HARRIS, DEVRA E
Address: 4618 LAFAYETTE AVE
City-St-Zip: SEBRING, FL 338755219

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:

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: NANCY K POELSTRA

D

04/01/2009

Electronic Signature of Signing Officer or Director

Date