## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N10645

FILED Jun 23, 2007 Secretary of State

Entity Name: SUNGLOW RESORT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3647 S. ATLANTIC AVE SUITE 5000 DAYTONA BEACH SHORES, FL 32127 US **New Mailing Address: Current Mailing Address:** 3511 S PENINSULA DR 444 SEABREEZE BLVD. DAYTONA BEACH SHORES, FL 32127 US DAYTONA BEACH, FL 32118 US FEI Number: 59-2563489 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUNT, JAMES MORBITZER, MARGARET L C/O SOUTHEAST MANAGEMENT SERVICES C/O MORBITZER COMMUNITIES, INC. 3511 SO. PENINSULA DRIVE 444 SEABREEZE BLVD, #645 DAYTONA BEACH, FL 32127 US DAYTONA BEACH, FL 32118 US 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: MARGARET L MORBITZER 06/23/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PASTRE, JOHN Name: Name: 9550 FREEMONT AVE N-2 Address: Address: City-St-Zip: MONTCLAIR, CA 91763 City-St-Zip: Title: () Delete Title: () Change () Addition SINCLAIR, PATRICIA Name: Name: Address: 12634 QUARTERHOUSE TR Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: Title: () Delete Title: () Change () Addition BELLANY, EDNA Name: Name: 16101 BALLANY WAY Address: Address: City-St-Zip: MONTVERDE, FL 34756 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: GREEN, JANET Name: Address: 400 STONG WATER LANE Address: City-St-Zip: OSWEGO, IL 60543 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GARRIGON, CHARLES GARRISON, CHARLES Name: Name: 1310 SLOMBA DRIVE 1310 SLOMBA DRIVE Address: Address: City-St-Zip: LAKE ORION, MI 48360 City-St-Zip: LAKE ORION, MI 48360

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: JOHN PASTRE Ρ 06/23/2007