

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 11, 2007 8:00 am**  
**Secretary of State**

01-11-2007 90050 045 \*\*\*\*61.25

<b>DOCUMENT # N11016</b>					
<b>1. Entity Name</b> SUNSET ESTATES HOMEOWNERS ASSOCIATION, INC.					
<b>Principal Place of Business</b> 2808 MANATEE AVE. W. BRADENTON, FL 34205			<b>Mailing Address</b> 2808 MANATEE AVE. BRADENTON, FL 34205		
<b>2. Principal Place of Business - No P.O. Box #</b> 2816 MANATEE AVE W		<b>3. Mailing Address</b> 2816 MANATEE AVE W			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b> BRADENTON FL		<b>City &amp; State</b> Bradenton FL		<b>4. FEI Number</b> 59-2838369	
<b>Zip</b> 34205		<b>Country</b> USA		<b>Applied For</b> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b> NELSON, MARK A 2808 MANATEE AVE. WEST BRADENTON, FL 34205			<b>7. Name and Address of New Registered Agent</b> Name: <u>Nelson, Mark A</u> Street Address (P.O. Box Number is Not Acceptable): <u>2816 Manatee Ave W</u> City: <u>Bradenton</u> <b>FL</b> Zip Code: <u>34205</u>		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE: <u>[Signature]</u> (NOTE: Registered Agent signature required when reinstating) DATE: _____					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEONARD, GEORGE 8406 14TH AVE NW BRADENTON, FL 34209	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NELSON, MARK 1315 84TH ST. NW BRADENTON, FL 34209	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARTIN, PAT 1310 85TH STREET NW BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FRITZ, CHRISTINE 1305 84TH NW BRADENTON, FL 34209	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GARDEN, JIM 8410 -14TH AVE NW BRADENTON, FL 34209	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GROSS, ALICE 1303 85TH STREET CT NW BRADENTON FL 34209	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>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.</b>					
SIGNATURE: <u>[Signature]</u> VP MARK A NELSON VP 1/4/07					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: _____ Daytime Phone #: _____					