

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11699

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** SUNPORT TECHNOLOGICAL CENTER, LTD. OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

2966 COMMERCE PARK DRIVE  
SUITE 450  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

2966 COMMERCE PARK DRIVE  
SUITE 450  
ORLANDO, FL 32819 US

**New Mailing Address:**

**FEI Number:** 59-3365017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COLEMAN, JOHN F  
2966 COMMERCE PARK DRIVE  
SUITE 450  
ORLANDO, FL 32819 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: PD  
Name: COLEMAN, JOHN F  
Address: 2966 COMMERCE PARK DRIVE STE 450  
City-St-Zip: ORLANDO, FL 32819 US

Title: D  
Name: RUFRANO, ANTHONY A  
Address: 2966 COMMERCE PARK DRIVE STE 450  
City-St-Zip: ORLANDO, FL 32819

Title: DST  
Name: NORRINGTON, SHIRLEY F  
Address: 2966 COMMERCE PARK DRIVE STE 450  
City-St-Zip: ORLANDO, FL 32819

I hereby 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 all other like empowered.

SIGNATURE: JOHN F COLEMAN

PD

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date