## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N14223

FILED Mar 24, 2009 Secretary of State

Entity Name: SUN COAST APARTMENT ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

POB 547832 843 CANOVIA AVE.

ORLANDO, FL 32854 ORLANDO, FL 32804 US US

**Current Mailing Address: New Mailing Address:** 

POB 547832

ORLANDO, FL 32854 US

FEI Number: 59-2511871 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:

RECCA, ELIZABETH T 843 CANOVIA AVE ORLANDO, FL 32804

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:

Date

Electronic Signature of Registered Agent

US

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

RECCA, ELIZABETH TAYLOR Name: Name: Address: 843 CANOVIA AVE. Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

Name: BERRY, LAWRENCE Name: SMETZER, BONNIE

Address: 139 CONNIE DR Address: 2174 HARRIS AVE. NE STE. 7 City-St-Zip: DAVENPORT, FL 33897 City-St-Zip: PALM BAY, FL 32905

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: ELIZABETH T. REECA D 03/24/2009