



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90045 031 ****61.25

DOCUMENT # N19897 1. Entity Name SUNNY PALMS WEST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O THE MANAGEMENT CONNECTION 8270 COLLEGE PKWY #103 FORT MYERS, FL 33919 US				Mailing Address C/O THE MANAGEMENT CONNECTION 8270 COLLEGE PKWY #103 FORT MYERS, FL 33919 US	
2. Principal Place of Business - No P.O. Box # SUNNY PALMS WEST CONDO Suite, Apt. #, etc. ASSOC., INC. #6		3. Mailing Address 1016 S.E. 8th STREET Suite, Apt. #, etc. #6			
City & State CAPE CORAL, FL		City & State CAPE CORAL, FL		4. FEI Number 59-2805161	
Zip 33990		Country LEE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TEAGUE, GEORGE 8270 COLLEGE PARKWAY #103 FORT MYERS, FL 33919				7. Name and Address of New Registered Agent Name ANDREW G. DUBOVSKY Street Address (P.O. Box Number is Not Acceptable) 1016 S.E. 8th STREET #6 City CAPE CORAL FL Zip Code 33990	
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. SIGNATURE <u><i>Andrew G. Dubovsky</i></u> 3/18/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PETERSON, KRISTIN 1016 SE 8TH ST #3 CAPE CORAL, FL 33990	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DUBOVSKY, ANDREW 1016 SE 8TH ST #6 CAPE CORAL, FL 33990	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DUBOVSKY, LYNN 1016 SE 8TH ST 6 CAPE CORAL, FL 33990	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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.					
SIGNATURE: <u><i>Andrew G. Dubovsky Reg Agent</i></u> 3/18/07 274-272-1962 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					