

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N31049 (2)

1. Corporation Name

SUNSET REEF HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**1700 MCMULLEN BOOTH ROAD
SUITE C-3
CLEARWATER FL 34619**

**1700 MCMULLEN BOOTH ROAD
SUITE C-3
CLEARWATER FL 34619**

3. Date Incorporated or Qualified
03/07/1989

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

59-2908279

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~HICKS, JOYCE M.
1700 MCMULLEN BOOTH ROAD
CLEARWATER FL 34619~~

PAID
1/22/96

81 Name

LENNARD A. LEIGHTON

82 Street Address (P.O. Box Number is Not Acceptable)

40 SEABOARD ARBORES MANAGEMENT

83

1700 MCMULLEN BOOTH ROAD, SUITE C3

84 City

CLEARWATER

FL

85 Zip Code

34619

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

1/22/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD BUTLER, JOHN L**
STREET ADDRESS **17960 GULF BLVD 214**
CITY-ST-ZIP **REDINGTON SHORES FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **NOVELLY, JOE**
STREET ADDRESS **17960 GULF BLVD 202**
CITY-ST-ZIP **REDINGTON SHORES FL**

2.1 TITLE **D** ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME **VD DAVIS, JANE**
STREET ADDRESS **17960 GULF BOULEVARD, #224**
CITY-ST-ZIP **REDINGTON SHORES FL**

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME **VP OGDEN, "TOBY" GARRET**
3.3 STREET ADDRESS **17960 GULF BOULEVARD, #213**
3.4 CITY-ST-ZIP **REDINGTON SHORES, FL 33708**

TITLE ☒ DELETE
NAME **DT GRODY, JOE**
STREET ADDRESS **17960 GULF BOULEVARD, #224**
CITY-ST-ZIP **REDINGTON SHORES FL**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **S/T GUEST, JOHNNIE**
4.3 STREET ADDRESS **17960 GULF BOULEVARD, #208**
4.4 CITY-ST-ZIP **REDINGTON SHORES, FL 33708**

TITLE ☐ DELETE
NAME **D CAMP, RAY**
STREET ADDRESS **17960 GULF BOULEVARD, #117**
CITY-ST-ZIP **REDINGTON SHORES FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-'96 Date **512 349 1146** Daytime Phone #

CR2E037 (12/95)