2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State
04-20-2005 90362 030 ****61.25

DOCUMENT # N36322

1. Entity Name
SUNSET MOBILE MANOR HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
50 SUNSET DRIVE NW WINTER HAVEN FL 33881	50 SUNSET DRIVE NW WINTER HAVEN FL 33881

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

04152005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-2984309 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BENNETT, BARRY W 60 SECOND ST SE WINTER HAVEN, FL 33880	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	D ☐ Delete	TITLE	D ☐ Change ☐ Addition
NAME	Elaine Morgan	NAME	Tom Ren 3388I
STREET ADDRESS	71 circle Drive NW	STREET ADDRESS	62 Circle Drive NW Winter Haven
CITY-ST-ZIP	WINTER HAVEN, FL 33881	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	DVP ☐ Change ☐ Addition
NAME	HART, JOHN	NAME	Richard Dillon 3388I
STREET ADDRESS	82 PARK LANE	STREET ADDRESS	19 Lake Drive NW Winter Haven
CITY-ST-ZIP	WINTER HAVEN, FL 33881	CITY-ST-ZIP	
TITLE	SD ☐ Delete	TITLE	DP ☐ Change ☐ Addition
NAME	Florence Wilt	NAME	Doug Sharples 3388I
STREET ADDRESS	4 Sunset Drive NW	STREET ADDRESS	45 Sunset Drive NW Winter Haven
CITY-ST-ZIP	WINTER HAVEN, FL 33881	CITY-ST-ZIP	
TITLE	JD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	J.C. Sprout	NAME	
STREET ADDRESS	50 Sunset Drive NW 3388I	STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN, FL	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KANNAS, DON	NAME	
STREET ADDRESS	28 LAKE DR.	STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	Will Motz	NAME	
STREET ADDRESS	2 Sunset Drive NW 3388I	STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: J.C. Sprout J.C. SPROUT TREAS. 4-16-05 863-956-4536
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #