

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2007 8:00 am
Secretary of State

02-23-2007 90023 005 ****61.25

DOCUMENT # N37708 1. Entity Name SUN AIR PROPERTY OWNERS/RESIDENTS ASSOCIATION, INC.					
Principal Place of Business 32 FAIRVIEW DRIVE N. HAINES CITY, FL 33844-7716 US				Mailing Address 32 FAIRVIEW DRIVE N. HAINES CITY, FL 33844-7716 US	
2. Principal Place of Business - No P.O. Box # 27 WOODLAND CIRCLE		3. Mailing Address 27 WOODLAND CIRCLE		01062007 Chg-NP CR2E037 (12/06)	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		4. FEI Number 59-3011411	
City & State HAINES CITY, FL		City & State HAINES CITY FL		Applied For Not Applicable	
Zip 33844-7716		Country POLK		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HERGE, HELEN D 32 FAIRVIEW DR N HAINES CITY, FL 33844-7716		7. Name and Address of New Registered Agent Name CATHY GOSSETT Street Address (P.O. Box Number is Not Acceptable) 27 WOODLAND CIRCLE City HAINES CITY FL Zip Code 33844			
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 _____ <small>Signature of the officer or director of the corporation or the registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.</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	TD HERGE, HELEN 32 FAIRVIEW DR N HAINES CITY, FL 338447716	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	TD GOSSETT, CATHY 27 WOODLAND CIRCLE HAINES CITY, FL 33844-7716	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	SD RIDDLE, KEN 20 SUN AIR BLVD E HAINES CITY, FL 338447716	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	SD DAVID BORKLUND 59 WOODLAND CIRCLE HAINES CITY, FL 33844-7716	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VPDC SCOTT, SHERYL 21 PINE RUN HAINES CITY, FL 338447716	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	VPD CAROLE MCGUIRE 2 WOODLAND CIRCLE HAINES CITY, FL 33844-7716	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D ELLIOTT, DUANE 5000 WATKINS RD. CONDO A-1 HAINES CITY, FL 338447716	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	SAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D EASTHAM, DONNA 21 BUCK CIRCLE HAINES CITY, FL 338447716	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	SAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	PD BROWN, LINDA 20 CYPRESS RUN HAINES CITY, FL 338447716	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	PD NANCY FLEETWOOD 47 WOODLAND CIRCLE HAINES CITY, FL 33844-7716	<input checked="" type="checkbox"/> Change <input checked="" 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>Nancy A Fleetwood, Pres.</u> <u>Nancy A Fleetwood</u> <u>02-19-07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					