

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **N42196** (8)

1. Corporation Name

SUNRISE CAY CONDOMINIUM ASSOCIATION, INC.

APPROVED
AND
FILED

95 MAY - 1 PM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

25000 TAMiami TRAIL EAST
NAPLES FL 33961

Mailing Address

25000 TAMiami TRAIL EAST
NAPLES FL 33961

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/22/1991

3a. Date of Last Report

03/04/1994

4. FET Number

65-0252067

Applied For

Not Applicable

2. Principal Place of Business

21 156 Eveningstar Cay

2a. Mailing Address

26 156 Eveningstar Cay

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Naples, FL

27 City & State

28 Naples, FL

24 Zip

25 33961

Country

25 Collier

29 Zip

30 33961

Country

30 Collier

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

\$68.75 Supplemental Fee Not Required

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

Yes No

9. Name and Address of Current Registered Agent

COOK, DAVID L.
% YOUNG VAN ASSENDERP VARNADOE & BENTON
801 LAUREL OAK DR., SUITE 300
NAPLES FL 33963

10. Name and Address of New Registered Agent

81 Name Marnell, Mary
82 Street Address (P.O. Box Number is Not Acceptable)
83 40 Mac'Kis - Marnell, P.A.
84 5551 Ridgewood Drive
85 City Naples FL 86 Zip Code 33963

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Mary Marnell

4/27/95

DATE

Signature, typed or printed name of registered agent and the if applicable

NOTE: Registered Agent signature required when revoking

12. OFFICERS AND DIRECTORS

TITLE D
NAME BARNARD, THOMAS L.
STREET ADDRESS 25000 TAMiami TRAIL EAST
CITY - ST - ZIP NAPLES FL 33961

TITLE D
NAME RAY, JON
STREET ADDRESS 25000 TAMiami TR. EAST
CITY - ST - ZIP NAPLES FL 33961

TITLE ST
NAME HANE, FREDERICK K.
STREET ADDRESS 2500 TAMiami TRAIL EAST
CITY - ST - ZIP NAPLES FL 33961

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE P/S/T
12 NAME BARNARD, THOMAS L.
13 STREET ADDRESS 156 Eveningstar Cay
14 CITY - ST - ZIP Naples FL 33961

21 TITLE
22 NAME
23 STREET ADDRESS Resigned - Delete this name etc.
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS 156 Eveningstar Cay
34 CITY - ST - ZIP Naples, FL 33961

41 TITLE D/V
42 NAME Hardy, Robert
43 STREET ADDRESS 156 Eveningstar Cay
44 CITY - ST - ZIP Naples, FL 33961

51 TITLE
52 NAME MULLIGAN, ANTJE
53 STREET ADDRESS 156 Eveningstar Cay
54 CITY - ST - ZIP NAPLES FL 33961

61 TITLE
62 NAME
63 STREET ADDRESS
64 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 110.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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:

Signature and typed or printed name of signing officer or director

Date

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