## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47319

FILED Jan 09, 2009 Secretary of State

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Entity Na	me: SUNRIDG	SE WOODS ASSOCIATION, II	NC.		
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Current F	Principal Place	of Business:	New Principal Place	of Business:	
	•				
	GY CRK RD ORT, FL 33837	US			
Current Mailing Address:			New Mailing Address	:	
P.O. BOX LOUGHM	622 AN, FL 33858	US			
FEI Numbe	r: 59-3107065	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	JOHN GY CRK RD ORT, FL 33837	US			
	e named entity s te of Florida.	submits this statement for the p	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	IRF.				
0.014, (10		ic Signature of Registered Ag	ent	 Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () REEVER, JOHN 116 FOGGY CR DAVENPORT, F	REEK ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	FOGARTY, SHE 106 FOGGY CR		Title: Name: Address:	( ) Change ( ) Addition	
	DAVENPORT, F		City-St-Zip:		
Title: Name: Address: City-St-Zip:		EL 33837 Delete HA LOOP	City-St-Zip: Title: Name: Address: City-St-Zip:	()Change()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN REEVER PRES 01/09/2009