

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000628

FILED
Apr 28, 2009
Secretary of State

Entity Name: SUNSHINE PARK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

524 UPLAND RD.
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6453
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 65-0407378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINE, CHERYL
524 UPLAND RD
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SAENZ, CHARLES
Address: 612 AVON RD
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: D () Delete
Name: SANEZ, LINDA
Address: 612 AVON RD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S () Delete
Name: SINE, CHERYL
Address: 524 UPLAND RD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: SCORZA, TOM
Address: 615 AVON RD.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: KNUPP, JOHN W
Address: 607 AVON RD.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: WILHELM, JAMES
Address: 533 WESTWOOD RD.
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WHEAT, GLORIA
Address: 614 SUNSET RD
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: T (X) Change () Addition
Name: ADKINS, JEFF
Address: 606 SUNSET RD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: SCORZA, TOM
Address: 615 AVON RD.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHERYL L SINE

SEC

04/28/2009

Electronic Signature of Signing Officer or Director

Date