2008 NOT-FOR-PROFIT CORPORATION

FILED Mar 28, 2008 8:00 am Secretary of State

ANNUAL REPORT								
DOCUMENT # N9300004718	A THE							

1. Entity Name SUNCREST UNIT 6 HOMEOWNERS' ASSOCIATION, INC.						03-28-2008	90030 035	<i>)</i> ******6.	1.25	
Principal Place of Business Mailing Address 2180 WEST SR 434 2180 WEST SR 434 SUITE 5000 SUITE 5000 LONGWOOD, FL 32779-5044 US LONGWOOD, FL 32779-5044		5044 US			18 1114 88 11 88 11 88 11	 				
Principal Place of Business - No P.O. Box # 3. Mailing Address										
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.			03112008	Chg-NP	CR2E037	(12/06)			
City & State City & State				4. FEI Number 59-32475	91			plied For Applicable		
Zip	Country	Zip	Country		5. Certificate of	Status Desired		3.75 Addi		
	6. Name and Address of Current	Registered Agent			7. Name and Ac	dress of New R	egistered Age	nt		
HART JAN	MES W.IR	•	N:	ame						
HART, JAMES W JR SENTRY MANAGEMENT INC. 2180 W. SR 434, STE. 5000			St	Street Address (P.O. Box Number is Not Acceptable)						
	OD, FL 32779-5044									
			Ci	ity			FL	Zip Code	t	
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. It am familiar with, and accept the obligations of registered agent. SIGNATURE Signature. Viged or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
	Signature, 1994a or printed trains or registered again.	and nee in approache. (NOTE:	- Again and Agai			 			,	
Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Financing Trust Fund Contribution.				cing	\$5.00 May Be Added to Fees		ake check p ida Departm	-		
10.	OFFICERS AND DIF	RECTORS	11.		ADDITIONS/CHAN	GES TO OFFICE			10	
TITLE NAME	PD MILLER, MICHAEL	☐ Delete	TIFLE	VPD	LER, MIKE		<u>Σ</u>	Change	☐ Addition	
STREET ADDRESS	10742 CHERRY OAK CIRCLE		STREET AD		42 CHERRY OA	K CIR				
CITY-ST-ZIP	ORLANDO, FL 32817		CITY-\$T-Z	P ORL	ANDO, FL 328	17				
TITLE	VPD DONLE, ROGER	☐ Delete	TITLE NAME	SD	LE, ROGER		2	S Change	Addition	
NAME STREET ADDRESS	4125 OAKBERRY DR		STREET AD	1	5 OAKBERRY D	R				
CITY-ST-ZIP	ORLANDO, FL 32817		CITY-ST-Z	P ORL	ANDO, FL 32	817				
TITLE	STD	Delete	TITLE	TD			2	Change	Addition	
NAME STREET ADDRESS	HANWELL, BERT 10836 CHERY OAK CIRCLE		NAMÉ STREET AD		WELL, BERT 336 CHERRY OA	Y CID				
CITY-ST-ZIP	ORLANDO, FL 32817		CITY-ST-Z	, 1 TO		817			ſ	
TITLE		☐ Defete	TITLE	PD] Change	Addition Addition	
NAME STREET ADDRESS			NAME STREET AD		LLERAN, BILL	NV CTD				
CITY-ST-ZIP			CITY-S1-Z		520 CHERRY O <i>l</i> LANDO, FL 32					
TITLE		☐ Delete	TITLE	D	·			Change	Addition	
NAME			NAME STREET AD	l	L, EDGAR					
STREET ADDRESS CITY-ST-ZIP			CITY-S1-Z		01 OAKBERRY I LANDO, FL 32	2817				
TITLE		□ Delete	TITLE	D				Change	X Addition	
NAME STREET ADDRESS			NAME STREET AD		NDRAK, CHRIS 00 OAKBERRY I	פח				
CITY-ST-ZIP		^	CITY-ST-2		LANDO, FL 3:					
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 supplymental 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 distered my lowered 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 entropwered.										
SIGNAT	URE: SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER OF	R DIRECTOR		- 7/11/ C	Date	Daylı	me Phone #		

#N93000004718

SUNCREST UNIT 6 HOMEOWNERS' ASSOCIATION INC N93000004718

BOARD OF DIRECTORS, CONTINUED

D QUINTANA, IRENE 10812 CHERRY OAK CIR ORLANDO, FL 32817