


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 08, 2004 08:00 AM
Secretary of State

| | |
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| DOCUMENT # N95000005582 |  |
| 1. Entity Name SUNBURST DRIVE HOMEOWNERS ASSOCIATION, INC. | |

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|---|---|
| Principal Place of Business 499 NORTH FERDON BOULEVARD CRESTVIEW, FL 32536 | Mailing Address 499 NORTH FERDON BOULEVARD CRESTVIEW, FL 32536 |
|---|---|



01072004 No Chg-NP GR2E037 (10/03)

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|--|---|
| 4. FEI Number 59-3390736 | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

RUSSELL, DAVID A
499 NORTH FERDON BLVD.
CRESTVIEW, FL 32536

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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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **DATE** _____

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

U00000106404
04/08/04-80014-011 61.25

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE PD | NAME RUSSELL, DAVID A |
| STREET ADDRESS 499 N. FERDON BLVD | CITY-ST-ZIP CRESTVIEW, FL 32536 |
| TITLE VD | NAME RUSSELL, IRENE C |
| STREET ADDRESS 6028 N. HWY 85 | CITY-ST-ZIP CRESTVIEW, FL 32536 |
| TITLE STD | NAME GRAY, THERESIA J |
| STREET ADDRESS 927 LIGHTHOUSE CHURCH RD | CITY-ST-ZIP BAKER, FL 32531 |
| TITLE | NAME |
| STREET ADDRESS | CITY-ST-ZIP |
| TITLE | NAME |
| STREET ADDRESS | CITY-ST-ZIP |
| TITLE | NAME |
| STREET ADDRESS | CITY-ST-ZIP |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: David A. Russell Jan 7, 2004 (850) 682-6156
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #