

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002282

FILED
Feb 11, 2010
Secretary of State

Entity Name: SUNNYSIDE BEACH LAKE DWELLER ESTATES, INC.

Current Principal Place of Business:

126 S. BLUE POND TRAIL
HAWTHORNE, FL 32640

New Principal Place of Business:

126 S. BLUE POND TRAIL
HAWTHORNE, FL 32640 US

Current Mailing Address:

126 S. BLUE POND TRAIL
HAWTHORNE, FL 32640

New Mailing Address:

126 S. BLUE POND TR.
HAWTHORNE, FL 32640 US

FEI Number: 59-3308662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, JAMES E
203 SUNNYSIDE DR
HAWTHORNE, FL 32640 US

Name and Address of New Registered Agent:

ROSS, JAMES E DP
203 SUNNYSIDE DR
HAWTHORNE, FL 32640 US

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: JAMES E. ROSS

02/11/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: ROSS, JAMES E DP
Address: 203 SUNNYSIDE DR
City-St-Zip: HAWTHORNE, FL 32640 US

Title: VP
Name: HOPE, FOREST VP
Address: 206 SUNNYSIDE DR.
City-St-Zip: HAWTHORNE, FL 32640 US

Title: DST
Name: SHULTZ, JEANNINE DST
Address: 126 S. BLUE POND TR.
City-St-Zip: HAWTHORNE, FL 32640 US

Title: D
Name: PAVLIK, RHONDA D
Address: 112 S. BLUE POND TR.
City-St-Zip: HAWTHORNE, FL 32640 US

Title: D
Name: BRAUN, GEORGE D
Address: 118 BENTLEY DR
City-St-Zip: HAWTHORNE, FL 32640 US

I hereby 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 all other like empowered.

SIGNATURE: JEANNINE SHULTZ

DST

02/11/2010

Electronic Signature of Signing Officer or Director

Date