


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90076 023 \*\*\*\*61.25

<b>DOCUMENT # N96000005028</b> 1. Entity Name <b>SUNSET CIVIC ASSOCIATION, INC.</b>					
Principal Place of Business <b>1900 SW 35TH AVENUE FORT LAUDERDALE, FL 33312</b>			Mailing Address <b>1900 SW 35TH AVENUE FORT LAUDERDALE, FL 33312</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>65-0751759</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>SUAREZ, ROGER 3549 SW 16 COURT FORT LAUDERDALE, FL 33312</b>			Name <b>Smith, Gregory</b> Street Address (P.O. Box Number is Not Acceptable) <b>2151 SW 35 AVENUE</b>  City <b>FORT LAUDERDALE</b> <b>FL</b> Zip Code <b>33312</b>		
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 <i>Gregory W. Smith, President</i> <small>Signature typed or printed name of registered agent and title if applicable.</small>				DATE <b>4/4/07</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>SUAREZ, ROGER</b> <b>3549 SW 16 COURT</b> <b>FORT LAUDERDALE, FL 33312</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>Smith, Gregory</b> <b>2151 SW 35 Avenue</b> <b>Fort Lauderdale, FL 33312</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>SMITH, GREGORY</b> <b>2151 SW 35 AVENUE</b> <b>FORT LAUDERDALE, FL 33312</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>Suarez, Roger</b> <b>3549 SW 16 Court</b> <b>Fort Lauderdale, FL 33312</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <b>CENKO, MARY</b> <b>3608 SW 22ND STREET</b> <b>FT LAUDERDALE, FL 33312</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <del>Stephanie</del> <b>Gansert, Stephanie</b> <b>1830 SW 36 Avenue</b> <b>Fort Lauderdale, FL 33312</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <b>SUAREZ, CHRIS</b> <b>3549 SW 16TH COURT</b> <b>FT LAUDERDALE, FL 33312</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <b>Suarez, Chris</b> <b>3549 SW 16 Court</b> <b>Fort Lauderdale, FL 33312</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>JACKSON, RITA</b> <b>3624 SW 21 STREET</b> <b>FT LAUDERDALE, FL 33312</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: <i>Roger W. Suarez</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <b>4 March 2007</b> Daytime Phone # <b>954 875 265</b>	



04042007 Chg-NP CR2E037 (12/06)

4. FEI Number  
65-0751759

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent  
 Name **Smith, Gregory**  
 Street Address (P.O. Box Number is Not Acceptable)  
**2151 SW 35 AVENUE**  
 City **FORT LAUDERDALE** **FL** Zip Code **33312**

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 SIGNATURE *Gregory W. Smith, President*  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  
 DATE **4/4/07**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

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SIGNATURE: *Roger W. Suarez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
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