2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N96000005356

1. Entity Name SUNRISE CAY II CONDOMINIUM ASSOCIATION, INC.



FILED Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90076 037 ****70.00

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Principal Place of Business CARDINAL MGMT GROUP OF S.FL.,INC. 5067 TAMIAMI TR EAST NAPLES, FL 34113		Mailing Address CARDINAL MGMT GROUP OF S.FL.,INC. 5067 TAMIAMI TR EAST NAPLES, FL 34113 US		1 1 1 1 1 1 1 1 1 1	<u> </u>	TIII MATUR AKAR KIRI AIRIA AR	14 151 11 111 1
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04102008	Chg-NP (CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-34124	ļ51		pplied For of Applicable
Zip	Country	Zip	Country	5. Certificate of	Status Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent		7. Name and Ad	dress of New Reg	istered Agent	•
CARDINAL MANAGEMENT GROUP				Name			
5067 TAM	IÄMI TR EAST NA FULKER		Street Ac	Street Address (P.O. Box Number is Not Acceptable)			
NAPLES, I	FL 34113						
	de de		City			FL Zip Cod	e
	named entity submits this statement for tions of registered agent.	r the purpose of changing its	registered office or	registered agent, or both,	in the State of Florid	la. I am familiar with,	and accept
tile opligat	nons of ragistered agent.				. (
SIGNATURE TO SOULLE MILLER CHAM					<u> </u>	-24.08	
	Signature, typed ar printed name of registered agent	and tate if applicable. (NOT	E: Registered Agent signatu	re required when reinstating)	,	DATE '	
	Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution.		I	e check payable to a Department of S	
10. OFFICERS AND DIRECTOR		RECTORS	11.	ADDITIONS/CHAN	GES TO OFFICERS	AND DIRECTORS IN	I 10
TITLE	P GIBERGA, OVIDIO	☐ Delete	TITLE			☐ Change	☐ Addition
NAME							
STREET ADDRESS	237 SUNRISE CAY #203		NAME Street Address				
STREET ADDRESS CITY-ST-ZIP.	•						
CITY-ST-ZIP.	237 SUNRISE CAY #203 NAPLES, FL 34114 VP	Delete	STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
CITY-ST-ZIP. TITLE NAME	237 SUNRISE CAY #203 NAPLES, FL 34114 VP CUSTER, CHARLES	Delete	STREET ADDRESS CITY-ST-ZIP TITLE NAME			☐ Change	☐ Addition
CITY-ST-ZIP.	237 SUNRISE CAY #203 NAPLES, FL 34114 VP	Delete	STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-08

239.774-0723 Daytime Phone #