2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005635

FILED Apr 17, 2007 Secretary of State

Entity Name: SUNWATCH ON ISLAND ESTATES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
670 ISLANE CLEARWA) WAY TER, FL 33767	US					
Current Mailing Address:				New Mailing Address:			
	ISLAND WAY EARWATER, FL 33767 US			28100 US HIGHWAY 19 NORTH CLEARWATER, FL 33761 US			
FEI Number:	59-3414476	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Des	sired ()
Name and	Address of Cu	rrent Registered Agent:	Name and Address of New Registered Agent:				
RABIN, BENNETT L 200 NORTH PINE AVENUE, SUITE A OLDSMAR, FL 346774613 US				REINHARDT, DEBBIE L 28100 US HIGHWAY 19 NORTH, SUITE 305 CLEARWATER, FL 33761 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: DEBBIE REINHARDT				04/17/2007			
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () Delete WARN, JO 670 ISLAND WAY #808 CLEARWATER, FL 33767			Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	DV () Delete GIACOMINI, JOE 670 ISLAND WAY #403 CLEARWATER BEACH, FL 33767 ST			Title: Name: Address: City-St-Zip:	Name: Address:		
Title: Name: Address: City-St-Zip:	STD () Delete BURWELL, ROBERT 680 ISLAND WAY 410 CLEARWATER, FL 33767			Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	D () D GIACOMINI, JOE PO BOX 3341 CLEARWATER BE			Title: Name: Address: City-St-Zip:	CLARK, SUE 670 ISLAND V	X) Change ()Addition NAY #1002 R BEACH, FL 33767	
Title: Name: Address: City-St-Zip:	D () D POWERS, GEOR 680 ISLAND WAY CLEARWATER BE	GE #701		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JO WARN P 04/17/2007