2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006039

FILED Mar 02, 2009 Secretary of State

Entity Name: SUN HARBOUR CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
851 COLL MARCO IS	IER CT BLAND, FL 34145	US			
Current Mailing Address:		New Mailing Addre	New Mailing Address:		
P.O. BOX MARCO IS	1514 SLAND, FL 34146	US			
FEI Number	: 59-3501808 FE	Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of Curre	nt Registered Agent:	Name and Address	of New Registered Agent:	
	., JAMIE DLLIER BLVD SLAND, FL 34145	US			
	named entity subm e of Florida.	its this statement for the p	purpose of changing its register	red office or registered agent, or both,	
	n=				
SIGNATUI					
SIGNATUI		gnature of Registered Ag	ent	Date	
SIGNATUI Officer:					
	Electronic Si	S:			
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic Signal Electronic S	S: e Y	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTORS	
OFFICER: Title: Name: Address:	Electronic Signature Signa	S: e e Y 34145 e SSA	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition	
OFFICER: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Address: Name: Address:	Electronic Signature Electroni	S: e Y 34145 e SSA 34145	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: ROY HERSHBERGER VD 03/02/2009