



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90073 045 ****61.25

DOCUMENT # N97000001344 1. Entity Name SUNSET KEY CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business SUNSET KEY CIRCLE PUNTA GORDA, FL 33955		Mailing Address P.O. BOX 511277 PUNTA GORDA, FL 33951-1277	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip		3. Mailing Address 6025 Taylor Rd Suite, Apt. #, etc. #2 City & State Punta Gorda, FL Zip 33950 Country USA	
		40009071  01112007 Chg-NP CR2E037 (12/06)	
		4. FEI Number 59-3481091	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STAR HOSPITALITY MANAGEMENT 6025 TAYLOR ROAD, SUITE 2 PUNTA GORDA, FL 33950		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PO Director GIPSTEIN, BARRY	TITLE	Director Kathryn Weicker
NAME		NAME	
STREET ADDRESS	3209 SUNSET KEY CIRCLE	STREET ADDRESS	3225 Sunset Key Circle
CITY-ST-ZIP	PUNTA GORDA, FL 33955	CITY-ST-ZIP	Punta Gorda, FL 33955
TITLE	PO President	TITLE	Director
NAME		NAME	
STREET ADDRESS	3201 SUNSET KEY CIRCLE	STREET ADDRESS	3201 Sunset Key Circle
CITY-ST-ZIP	PUNTA GORDA, FL 33955	CITY-ST-ZIP	Punta Gorda, FL 33955
TITLE	S	TITLE	Director
NAME		NAME	
STREET ADDRESS	3285 SUNSET KEY CIRCLE	STREET ADDRESS	High Hogley
CITY-ST-ZIP	PUNTA GORDA, FL 33955	CITY-ST-ZIP	3257 Sunset Key Circle
TITLE	T	TITLE	Director
NAME		NAME	
STREET ADDRESS	3289 SUNSET KEY CIRCLE	STREET ADDRESS	George Peterson
CITY-ST-ZIP	PUNTA GORDA, FL 33955	CITY-ST-ZIP	3211 Sunset Key Circle
TITLE	D	TITLE	Treasurer
NAME		NAME	
STREET ADDRESS	3233 SUNSET KEY CIR.	STREET ADDRESS	Bill Peterson
CITY-ST-ZIP	PUNTA GORDA, FL 33955	CITY-ST-ZIP	3273 Sunset Key Circle
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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 info empowered.			
SIGNATURE: <u>Nancy E. Godina</u>		<u>02/01/07</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
		Daytime Phone #	