2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2004 8:00 am Secretary of State

DOCUMENT # N9800003496 1. Entity Name SUNSET CAY VILLAS V CONDOMINIUM ASSOCIATION, INC.					04-26-2004 91052 008 ****61.25			
Principal Place of Business 834 BALD EAGLE DR MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145 MARCO ISLAND, FL 341						**n08A3;	3	
2. Principal Place of Business		3. Mailing Address			-	.•		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04132004 Chg-NP CR2E037 (10/03)			
City & State		City & State	City & State		4. FEI Number Applied For 65-0996809 Not Applicable			
Zip Country		Zip	Zip Country		5. Certificate of Status Desired See Required Fee Required			
L	6. Name and Address of Current	Registered Agent	T		7. Name and Addres	s of New Registered A	gent	
				Name				
GRUESEL, JAMIE 1104 N COLLIER MARCO ISLAND, FL 34145				Street Address (P.O. Box Number is Not	lot Acceptable)		
				City	•	FL	Zip Cod	e
8. The above the obliga	e named entity submits this statement fo ations of registered agent.	or the purpose of changing its	registere	ed office or register	red agent, or both, in the	State of Florida, I am fa	ımiliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	d Agent signature required	d when reinstating)	DATE		
		9. Election.Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10.	OFFICERS AND DI	RECTORS	11.	·	ADDITIONS/CHANGES	TO OFFICERS AND DIR	ECTORS IN	10
		- X //			ADDITIONS/CHANGES		,	
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12. I hereby certify that the information supplied with this filling boes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true-single 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 receive of trustee empowered bexecute 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:

SNATURE AND TYPED OF DESIRED NAME OF SIGNING OFFICER OR DIRECTOR

1/23-04 239-30 Date Dayline

239-3897384 Daytime Phone #