

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003496

FILED
Mar 17, 2009
Secretary of State

Entity Name: SUNSET CAY VILLAS V CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

834 BALD EAGLE DR
MARCO ISLAND, FL 34145

New Principal Place of Business:

170 NEWPORT DRIVE
NAPLES, FL 34114

Current Mailing Address:

834 BALD EAGLE DR
MARCO ISLAND, FL 34145

New Mailing Address:

P.O. BOX 362
MARCO ISLAND, FL 34146

FEI Number: 65-0996809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUESEL, JAMIE
1104 N COLLIER
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: HENRY, ART
Address: 247 NORTH POINT RD
City-St-Zip: OCEAN CITY, NJ 08226

Title: STD () Delete
Name: PAGAC, RICHARD
Address: 2996 LOON LAKE SHORES
City-St-Zip: WATERFORD, MI 48329

Title: PD () Delete
Name: HAWKINS, CHARLES
Address: 7791 ST ANDREWS RD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: HENRY, ART
Address: 170 NEWPORT DRIVE # 1103
City-St-Zip: NAPLES, FL 34114

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: HAWKINS, CHARLES
Address: 170 NEWPORT DRIVE # 1102
City-St-Zip: NAPLES, FL 34114

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: CHARLES HAWKINS

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03/17/2009

Electronic Signature of Signing Officer or Director

Date