

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000014095

FILED
Apr 29, 2009
Secretary of State

Entity Name: SUNNY ACRES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4025 46TH AVE NORTH
ST PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

4025 46TH AVE NORTH
ST PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 20-8384856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLACHLAN, BRYAN K
4025 46TH AVE NORTH
ST PETERSBURG, FL 33714 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KESSLER, ED
Address: 4025 46TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: D VP () Delete
Name: LANE, VIRTA
Address: 4025 46TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: DS () Delete
Name: MCDERMOTT, WANDA
Address: 4025 46TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: DT () Delete
Name: HOLT, GARY
Address: 4025 46TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ED KESSLER

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date