

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 731591

**Entity Name:** SUNRISE COMMUNITY ASSOCIATION, INC.

**FILED**  
**Apr 05, 2019**  
**Secretary of State**  
**0806596366CC**

**Current Principal Place of Business:**

10,000 SW 52 AVENUE  
THE LINKS CLUBHOUSE  
GAINESVILLE, FL 32608

**Current Mailing Address:**

10,000 SW 52 AVENUE  
THE LINKS CLUBHOUSE  
GAINESVILLE, FL 32608 US

**FEI Number:** 59-1645085

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GUARDIAN ASSOCIATION MANAGEMENT LLC  
10,000 SW 52 AVENUE  
THE LINKS CLUBHOUSE  
GAINESVILLE, FL 32608 US

*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:** TOM EATON

04/05/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SCHEICK , BRIAN  
Address 1814 SW 78TERRACE  
City-State-Zip: GAINESVILLE FL 32607

Title TREASURER  
Name AUSTIN, TIM  
Address 1710 SW 76 TERRACE  
City-State-Zip: GAINESVILLE FL 32607

Title PRESIDENT  
Name BAUMGARTNER, TOM  
Address 1616 SW 77 TERRACE  
City-State-Zip: GAINESVILLE FL 32607

Title SECRETARY  
Name MILLER, DAVE  
Address 7624 SW 18 PLACE  
City-State-Zip: GAINESVILLE FL 32607

Title VP  
Name HAND, WAYNE  
Address 1916 SW 80 DRIVE  
City-State-Zip: GAINESVILLE FL 32607

*I hereby 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 all other like empowered.*

**SIGNATURE:** TOM BAUMGARTNER

PRESIDENT

04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date