

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749376

**Entity Name:** SUNRISE BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

AMERICAN CONDO MGMT INC  
4223 DEL PRADO BLVD SOUTH  
CAPE CORAL, FL 33904

**Current Mailing Address:**

AMERICAN CONDO MGMT INC  
PO BOX 100399  
CAPE CORAL, FL 33910 US

**FEI Number:** 59-2034484

**Certificate of Status Desired:** No

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

KASE, SUSAN CAM  
C/O AMERICAN COND MGMT INC  
4223 DEL PRADO BLVD SOUTH  
CAPE CORAL, FL 33904 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name ZOELLER, STEPHEN  
Address PO DRAWER 6885  
City-State-Zip: FT MYERS FL 33911

Title T  
Name HERSEY, BRIAN  
Address 4629 SE 5TH AVE #201  
City-State-Zip: CAPE CORAL FL 33904

Title S  
Name MATTHIES, FREDERICK  
Address 4631 SE 5TH AVE #106  
City-State-Zip: CAPE CORAL FL 33904

Title P  
Name HUNTER, WALLACE  
Address 4631 SE 5TH AVE # 204  
City-State-Zip: CAPE CORAL FL 33904

Title VP  
Name BURNS, RONALD  
Address 9 ROOSEVELT AVE  
City-State-Zip: HAZLET NJ 07730

*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:** WALLACE HUNTER

**PRESIDENT**

**04/15/2013**

Electronic Signature of Signing Officer/Director Detail

Date