

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 13, 2015
Secretary of State
CC7148216684

Entity Name: SUNSET STREAM RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

C/O SANDCASTLE COMMUNITY MANAGEMENT
5495 BRYSON DRIVE SUITE 412
NAPLES, FL 34109

Current Mailing Address:

C/O SANDCASTLE COMMUNITY MANAGEMENT
5495 BRYSON DRIVE SUITE 412
NAPLES, FL 34109 US

FEI Number: 65-1099388

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOEDE, ADAMCZYK & DEBOEST, PLLC
8950 FONTANA DEL SOL WAY - SUITE 100
NAPLES, FL 34109 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: MARK ADAMCZYK

02/13/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name EBERSOLDT, SUE
Address 5495 BRYSON DRIVE SUITE 412
City-State-Zip: NAPLES FL 34109

Title VP
Name SPADER , ART
Address 5495 BRYSON DRIVE SUITE 412
City-State-Zip: NAPLES FL 34109

Title SECRETARY / TREASURER /
 DIRECTOR AT LARGE
Name WARREN, PAT
Address 5495 BRYSON DRIVE SUITE 412
City-State-Zip: NAPLES FL 34109

Title DIRECTOR AT LARGE
Name WARD, GARY
Address 5495 BRYSON DRIVE SUITE 312
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name CAFFEY, DERRELL
Address 5495 BRYSON DRIVE SUITE 412
City-State-Zip: NAPLES FL 34109

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: SUE EBERSOLDT

PRESIDENT

02/13/2015

Electronic Signature of Signing Officer/Director Detail

Date