

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003306

**FILED**  
**Mar 10, 2014**  
**Secretary of State**  
**CC1615995511**

**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

03/10/2014

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**

03/10/2014

Electronic Signature of Signing Officer/Director Detail

Date