

**2014 FLORIDA NON PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006025

**Entity Name:** SUNSET POINT ASSOCIATION, INC.

**Current Principal Place of Business:**

164 SUNSET CIRCLE NORTH  
ST. AUGUSTINE, FL FL 32080

**Current Mailing Address:**

P.O. BOX 840334  
ST. AUGUSTINE, FL 32080

**FEI Number:** 51-0495938

**Certificate of Status Desired:** No

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

POWELL, RONALD  
164 SUNSET CIRCLE NORTH  
ST. AUGUSTINE, FL 32080 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:** RONALD POWELL

04/04/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            POWELL, RONALD  
Address        164 SUNSET CIRCLE NORTH  
City-State-Zip: ST. AUGUSTINE FL 32080

Title            VP  
Name            BECK, DAVID  
Address        170 SUNSET CIRCLE NORTH  
City-State-Zip: ST. AUGUSTINE FL 32080

Title            SEC/TREAS  
Name            WILLIAMS, MAX  
Address        139 SUNSET CIRCLE SOUTH  
City-State-Zip: ST. AUGUSTINE FL 32080

*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:** RONALD POWELL

PRESIDENT

04/04/2014

Electronic Signature of Signing Officer/Director Detail

Date