


FILE NOW: FILING FEE IS \$61.25

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Apr 15 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Northam, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 706002 (3)

1. Corporation Name

SUNLAND APARTMENTS INC NUMBER TWO

Principal Place of Business

Mailing Address

3851 NE 21ST AVE.  
LIGHTHOUSE POINT FL 33064  
US

3851 NE 21ST AVE  
LIGHTHOUSE PT FL 33064  
US

3. Date Incorporated or Qualified

08/07/1963

4. FEI Number

59-1087722

Applied For  
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country  
24 25

28 Zip Country  
29 30

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUBIN, MARGARET  
3850 NE 21ST WAY #58  
LIGHTHOUSE POINT FL 33064

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME DEGORIA, JOHN  
STREET ADDRESS 3880 NE 21ST WAY #42  
CITY-ST-ZIP LIGHTHOUSE POINT FL

☒ DELETE

TITLE D  
NAME PETER SZELI  
STREET ADDRESS 3851 NE 21 ST AVE., APT 29  
CITY-ST-ZIP LIGHTHOUSE POINT FL

☐ DELETE

TITLE VP  
NAME JOHN POWERS  
STREET ADDRESS 3851 NE 21 ST AVE., APT. 22  
CITY-ST-ZIP LIGHTHOUSE POINT FL

☐ DELETE

TITLE D  
NAME JOSEPH, ARTHUR  
STREET ADDRESS 3851 N.E. 21ST WAY  
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

☒ DELETE

TITLE TD  
NAME RUBIN, MARGARET  
STREET ADDRESS 3850 NE 21ST WAY #58  
CITY-ST-ZIP LIGHTHOUSE POINT FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

1.1 TITLE PRESIDENT - D.  
1.2 NAME RAYMOND F KENNEDY  
1.3 STREET ADDRESS 3851 NE 21st. Ave., Apt. 24  
1.4 CITY-ST-ZIP Lighthouse Point, FL 33064

☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE SECRETARY D  
4.2 NAME LORRAINE KEMPTON  
4.3 STREET ADDRESS 3851 NE 21st. Ave., Apt. 30  
4.4 CITY-ST-ZIP Lighthouse Point, FL 33064

☒ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

RAYMOND F KENNEDY

FEB. 4, 1998 954-941-4688

CP2E037 (10/97)