2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State
04-25-2005 90246 049 ****61.25

DOCUMENT # 706002

1. Entity Name
SUNLAND APARTMENTS, INC. NUMBER TWO

Principal Place of Business	Mailing Address
3850 NE 21ST WAY #~~04~~ LIGHTHOUSE POINT, FL 33064 US	3850 NE 21ST WAY #~~04~~ LIGHTHOUSE POINT, FL 33064 US

04142005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	2771 Treasure Cove Circle Suite, Apt. #, etc.
City & State	City & State: Fort Lauderdale, FL
Zip / Country	Zip: 33312 / Country: FL-SA

4. FEI Number 59-1087722 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SHAPIRO, ~~FRANK~~ PAUL 2771 TREASURE COVE CIRCLE FT LAUDERDALE, FL 35312 33312	Name: SHAPIRO PAUL Street Address (P.O. Box Number is Not Acceptable) City: **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Paul Shapiro 4/18/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CONA, JOSEPH 2001 NE 38TH STREET # 9 LIGHTHOUSE POINT, FL 33064	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	HARRY WADE P 3860 NE 21ST WAY #36 LIGHTHOUSE POINT, FL 33064	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S JULIUS, KAREN 3851 NE 21ST AVE # 2 LIGHTHOUSE POINT, FL 33064	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JOHN POWERS VP 3851 NE 21ST AVE #22 LIGHTHOUSE POINT, FL 33064	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STREEGEL, ROBERT 3860 NE 21 WAY #40 LIGHTHOUSE POINT, FL 33064	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ROBERT STRIEGEL T 3860 NE 21ST WAY #40 LIGHTHOUSE POINT, FL 33064	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ALTMAN, HELEN 2001 NE 38TH STREET # 2 BOCA RATON, FL 33487	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ANGELO SANQUEDOLCE D 3850 NE 21ST WAY #53 ~~LIGHTHOUSE POINT, FL 33064~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RUBIN, MARGARET 3850 NE 21 WAY #58 LIGHTHOUSE POINT, FL 33064	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MARGARET RUBIN S 3850 NE 21ST WAY #58 LIGHTHOUSE POINT, FL 33064	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Robert J Striegel 4/20/05 954-784-4085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #