2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706002

FILED Apr 13, 2008 Secretary of State

Entity Name: SUNLAND APARTMENTS, INC. NUMBER TWO

Current Principal Place of Business: New Principal Place of Business: 3850 NE 21ST WAY LIGHTHOUSE POINT, FL 33064 US **Current Mailing Address: New Mailing Address:** 3850 NE 21 WAY LIGHTHOUSE POINT, FL 33064 US FEI Number: 59-1087722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KATZMANN AND KORR 1501 NW 49TH STREET SUITE 202 FORT LAUDERDALE, FL 33309 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition O'DONNELL, SHANNON Name: Name: 3860 NE 21ST WAY #5 Address: Address: City-St-Zip: LIGHTHOUSE POINT, FL 33064 City-St-Zip: Title: () Delete Title: () Change () Addition Name: JULIUS, KAREN Name: Address: 3851 NE 21ST AVE #13 Address: City-St-Zip: LIGHTHOUSE POINT, FL 33064 City-St-Zip: Title: () Delete Title: (X) Change () Addition STRIEGEL, ROBERT SLIKER, HOWARD Name: Name: Address: 3860 NE 21 WAY #40 Address: 3860 NE 21 WAY #35 City-St-Zip: LIGHTHOUSE POINT, FL 33064 City-St-Zip: LIGHTHOUSE POINT, FL 33064 Title: () Delete Title: () Change () Addition Name: BIVIALNO, PATRICIA Name: Address: 380 NE 21 WAY Address: LIGHTHOUSE POINT, FL 33064 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition RUBIN, MARGARET ALTMAN, HELEN Name: Name: 3850 NE 21ST WAY #58 801 S FEDERAL HWY #420 Address: Address: LIGHTHOUSE POINT, FL 33064 City-St-Zip: City-St-Zip: POMPANO BEACH, FL 33062

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMIE BLUM PM 04/13/2008