

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# 723912

Entity Name: SUNRISE TOWNE PREFERRED CONDOMINIUM, INC.

Current Principal Place of Business:

4780 N. STATE RD. 7 E 250
LAUDERDALE LAKES, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

4780 N. STATE RD. 7 E 250
FORT LAUDERDALE, FL 33319 US

New Mailing Address:

FEI Number: 59-2209173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHOENIX MANAGEMENT SERVICES INC.
4780 N. STATE RD. 7 E 250
LAUDERDALE LAKES, FL 33319 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: MYERS, ANDREA
Address: 5967 NW 29 ST.
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: RIVERA, MARIA
Address: 2698 NW 60TH WAY
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: MARGUES, ARELIS
Address: 5950 NW 28TH ST
City-St-Zip: SUNRISE, FL 33313

Title: TD () Delete
Name: KITAIN, JEFF
Address: 5959 NW 27TH PL
City-St-Zip: SUNRISE, FL 33313

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FREEMAN, ANGELA
Address: 5958 NW 25 ST.
City-St-Zip: SUNRISE, FL 33313

Title: VPD (X) Change () Addition
Name: FOSTER, REYNOLD
Address: 5967 NW 29TH WAY
City-St-Zip: SUNRISE, FL 33313

Title: SD (X) Change () Addition
Name: CARRINGTON, ALLISON
Address: 2611 NW 60TH WAY
City-St-Zip: SUNRISE, FL 33313

Title: TD (X) Change () Addition
Name: GOODEN, MARTIN
Address: 5971 NW 25TH PLACE
City-St-Zip: SUNRISE, FL 33313

Title: D () Change (X) Addition
Name: DARIUS, MARISE
Address: 5952 NW 25 CT
City-St-Zip: SUNRISE, FL 33313

Title: D () Change (X) Addition
Name: KIFFIN, JULIE
Address: 5959 NW 25 CT
City-St-Zip: SUNRISE, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the 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: ALLISON CARRINGTON

SD

04/26/2006

Electronic Signature of Signing Officer or Director

Date