

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723912

FILED
Jan 08, 2008
Secretary of State

Entity Name: SUNRISE TOWNE PREFERRED CONDOMINIUM, INC.

Current Principal Place of Business:

2600 NW 60TH TERR
SUNRISE, FL 33313 US

New Principal Place of Business:

C/O DMS, INC.
2600 NW 60TH TERR
SUNRISE, FL 33313 US

Current Mailing Address:

2600 NW 60TH TERR
SUNRISE, FL 33313 US

New Mailing Address:

C/O DMS, INC.
6041 KIMBERLY BLVD. STE D
NORTH LAUDERDALE, FL 33068 US

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:

DMS, INC.
6041 KIMBERLY BLVD STE D
NORTH LAUDERDALE, FL 33068 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: MARCELO L. MARTINEZ

01/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

Title: D () Delete
Name: FOSTER, REYNOLD
Address: 5967 NW 29TH WAY
City-St-Zip: SUNRISE, FL 33313

Title: VP () Delete
Name: KIFFIN, JULIE
Address: 5959 NW 25 CT
City-St-Zip: SUNRISE, FL 33313

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT () Change (X) Addition
Name: SCOTT, PAULETTE S DT
Address: 5975 NW 25TH COURT
City-St-Zip: SUNRISE, FL 33313 US

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: ANGELA FREEMAN

PD

01/08/2008

Electronic Signature of Signing Officer or Director

Date