


**2004 NOT-FOR-PROFIT CORPORATION
AMENDED ANNUAL REPORT**

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DOCUMENT # 724902

1. Entity Name
SUNSET VILLAS ASSOCIATION, INC



FILED
04 NOV 30 AM 10: 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
4713 N.W SEVENTH STREET
MIAMI, FL 33126 US

Mailing Address
C/O J&M CONDO MANAGEMENT
275 FOUNTAINBLEAU BLVD. -SUITE 200
MIAMI, FL 33172 US



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

11152004 Chg-NP CR2E037 (10/03)

City & State

4. FEI Number
59-1577800

Applied For
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent

J&M CONDO MANAGEMENT
275 FOUNTAINBLEAU BLVD.
SUITE 200
MIAMI, FL 33172

7. Name and Address of New Registered Agent

Name

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TAILEFFER, ORLANDO 275 FONTAINEBLEAU BLVD., #200 MIAMI, FL 33172	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VIDAL, EMICLIO JR. 275 FOUNTAINBLEAU BLVD. - SUITE 200 MIAMI, FL 33172	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GONZALEZ, JESUS 275 FOUNTAINBLEAU BLVD. - SUITE 200 MIAMI, FL 33172	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DEL PINO, BARBARA 275 FOUNTAINBLEAU BLVD. -SUITE 200 MIAMI, FL 33172	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DEL PINO, BARABRA 275 FOUNTAINBLEAU BLVD. - SUITE 200 MIAMI, FL 33172	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT LARA, CARLOS 275 FOUNTAINBLEAU BLVD. -SUITE 200 MIAMI, FL 33172	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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11/30/04--01038--002 **61.25

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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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

→ APPROVED

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to Add

Elio Blanco - V/S
275 Fontainebleau Blvd. #200
Miami, FL 33170