

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729230

FILED
May 15, 2007
Secretary of State

Entity Name: SUNRISE LAKES CONDOMINIUM APTS., INC. 5

Current Principal Place of Business:

8133 SUNRISE LAKES BLVD
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

8133 SUNRISE LAKES BLVD
SUNRISE, FL 33322

New Mailing Address:

FEI Number: 59-1570904 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRIEDMAN, CAROLYN
8133 SUNRISE LAKES BLVD
SUNRISE, FL 33322 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: VP () Delete
Name: GONZALEZ, RICARDO
Address: 8200 SUNRISE LAKES BLVD. #312
City-St-Zip: SUNRISE, FL 33322

Title: VP () Delete
Name: SIMON, BENJAMIN
Address: 8220 SUNRISE LAKES BLVD #306
City-St-Zip: SUNRISE, FL 33322

Title: TD () Delete
Name: SILVER-HANKEN, EDNA
Address: 8510 SUNRISE LAKES BLVD. #103
City-St-Zip: SUNRISE, FL 33322

Title: P () Delete
Name: FRIEDMAN, CAROLYN
Address: 8515 SUNRISE LAKES BLVD #101
City-St-Zip: SUNRISE, FL 33322

Title: DS () Delete
Name: SOLOMON, CINDI
Address: 8435 SUNRISE LAKES BLVD. #107
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: 2VP (X) Change () Addition
Name: VITTA, JOE
Address: 8590 SUNRISE LAKES BLVD #201
City-St-Zip: SUNRISE, FL 33322

Title: 1VP (X) Change () Addition
Name: SIMON, BENJAMIN
Address: 8220 SUNRISE LAKES BLVD #306
City-St-Zip: SUNRISE, FL 33322

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

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

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

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: CAROLYN FRIEDMAN

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05/15/2007

Electronic Signature of Signing Officer or Director

_____ Date