

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 16 AM 11: 23

DOCUMENT # 745736 (9)
1. Corporation Name
SUNSET HILLS CONDOMINIUM ASSOCIATION, INC.



REINSTATEMENT 96

Principal Place of Business Mailing Address
3710 NORTHWEST 21 STREET SUITE 101 LAUDERDALE LAKES FL 33060 US
632 SOUTH STATE ROAD 7 MARGATE FL 33068 US

3. Date Incorporated or Qualified 01/26/1979 3a. Date of Last Report 05/01/1995

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26 2979 N. W. 56 Avenue	59-2005567	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State	City & State	28	Lauderhill, Fla.
Zip	Country	29	33313
24	25	30	Broward

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
STEWART, DENNIS (ESQ.) 630 SOUTH STATE ROAD 7 MARGATE FL 33068	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2979 N. W. 56 Avenue 83 84 City Lauderhill FL 85 Zip Code 33313

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0508, Florida Statutes.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	VP/Sec/Dir.
NAME	GANDON, FERNANDO	1.2 NAME	Nerissa Spannos
STREET ADDRESS	632 SOUTH STATE ROAD 7	1.3 STREET ADDRESS	2979 N. W. 56 Avenue
CITY-ST-ZIP	MARGATE FL	1.4 CITY-ST-ZIP	Lauderhill, Florida, 33313
TITLE	VPD	2.1 TITLE	P/Dir.
NAME	HAASE, FRANK	2.2 NAME	
STREET ADDRESS	632 SOUTH STATE ROAD 7	2.3 STREET ADDRESS	2979 N. W. 21 St.
CITY-ST-ZIP	MARGATE FL	2.4 CITY-ST-ZIP	Lauderhill, Fla., 33313
TITLE	D	3.1 TITLE	Dir.
NAME	ROSEMARIE GRIDER	3.2 NAME	Shirley Hunt
STREET ADDRESS	4693 NW 22 ST	3.3 STREET ADDRESS	2979 N. W. 56 Avenue
CITY-ST-ZIP	COCONUT CREEK FL	3.4 CITY-ST-ZIP	Lauderhill, Fla., 33313
TITLE		4.1 TITLE	Dir.
NAME		4.2 NAME	George Hunt
STREET ADDRESS		4.3 STREET ADDRESS	2979 N. W. 56 Avenue
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Lauderhill, Fla., 33313
TITLE		5.1 TITLE	
NAME		5.2 NAME	700002032117
STREET ADDRESS		5.3 STREET ADDRESS	-12/18/96--01026--010
CITY-ST-ZIP		5.4 CITY-ST-ZIP	****245.00 ****245.00
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: 11/18/96 954-484-7876
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)