FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 748910

1. Corporation Name

SUNRISE OF PALM BEACH CONDOMINIUM ASSOCIATION, I NC. 2

Principal Place of Business C/ G.R.S. MANAGEMENT ASSOCIATES. INC 3900 WOODLAKE BLVD., STE 201 LAKE WORTH FL 33463

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

C/ G.R.S. MANAGEMENT ASSOCIATES. INC 3900 WOODLAKE BLVD.. STE 201 LAKE WORTH FL 33463

26

FILED Mar 01, 1999 8:00 am § Secretary of State

03-01-1999 90152 010 ****61.25



Date Incorporated or Qualifed

09/14/1979

Suite, Apt.	# etc.	Suite, Apt. #, etc.				4.	FEI Number	A	pplied For	
22	27						59-2372309	· · · 	ot Applicable	
City & Stat	e	City & State						\$8.75	Additional	
23		28				3.	Certificate of Status Desired L	Fee R	equired	
Zip	Country	Zip	Co	untry		6.	Election Campaign Financing	\$5.00	May Be	
24	25	29	30			l	Trust Fund Contribution	Added	to Fees	
		10. Name and Address of New Registered Agent								
				81	Name					
BECKER & POLIAKOFF				82	Stroot Ado	Street Address (P.O. Box Number is Not Acceptable)				
500 AUSTRALIAN AVE				OZ Silest Address (F.O. Box Humber is Not Acceptable)						
9TH FLOOR				83						
WEST PALM BEACH FL 33401					0'4 :			ies Zio	Codo	
WEST FARM DEACHTE SSHOT				84 City FL 85 Zip Code						
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the					-named cor	orporatio	n submits this statement for the pur	pose of changing its	s 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 617.0503, Florida Statutes.										
-										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT		
TITLE	DP	☐ DELETE	1,1 1	TTLE	-	-		Change	Addition	
NAME	SILVERMAN, JOSEPH		1.2 N	AME					- 1	
STREET ADDRESS	7682 TAHITI LANE, #104		1.3 9	TREET	ADDRESS				İ	
CITY-ST-ZIP	LAKE WORTH FL 33467			4 CITY-ST-ZIP						
TITLE	DVP	☐ DELETE	2.1 1	TILE	[. ——		☐ Change	Addition	
NAME	BERNARD GOLDBERG			IAMÉ			yers.		Į	
STREET ADDRESS	4900 LUCEERNE LAKES BLVD.,	#102	2.3 5	TREET	ADORESS		e ja varamaning og varamaning storetter	مر رقه سنسجين بريان پرسه در يادر په ۱۰		
CITY-ST-ZIP	LAKE WORTH FL 33461		2.4	CITY-S]	T-ZIP	·				
TTILE	D	DELETE	3.1 T	TILE		عد		☐ Change	Addition	
NAME	LILLIAN SCHECHTEL		3.2	IAME	RX	OBER	TGRANT			
STREET ADDRESS	7698 TAHITI LANE, #102		3.3 8	TREET	ADDRESS $ert 7.$	1578	TAHITI LANE # 101		t	
CITY-ST-ZIP	AKE WORTH FL 33461			3.4. CITY-ST-ZIP		-AKE	WORTH, FL 3340	<u> </u>		
TITLE	DT	☐ DELETE	4.1 7	TTLE	0)		Change	☐ Addition	
NAME	BERNARD KOPEKOFF		4.2	NAME	181	BERN	ard, kopeloff			
STREET ADDRESS	7658 TAHITI LANE, #103		4.3 8	TREET	ADDRESS				ŀ	
CITY-ST-ZIP	LAKE WORTH FL 33461		4.4 0	CITY-ST						
TITLE	D	☐ DELETE		ITLE	14.	T		Change	☐ Addition	
NAME	FRED DIAMOND			MAME						
STREET ADDRESS	7633 TAHITI LANE, #103		5.3 9	STREET	ADDRESS					
CITY-ST-ZIP	LAKE WORTH FL 33461			TY-ST			<u></u>	· · ·	· · · · ·	
TITLE	D	☐ DELETE	6.1 T	TILE	[2	AND		_ Change	☐ Addition	
NAME	MARTIN GOLDMAN		6.2	VAME		•			}	
STREET ADDRESS			6.3 5	TREET	ADDRESS					

6.4 CITY-ST-ZIP LAKE WORTH FL 33461 14. 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 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 opportunity with an address, with all other like empowered.

SIGNATURE:

CITY-ST-7IP

<u> 561-641-855</u>4