2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748910

FILED Jan 26, 2012 Secretary of State

Entity Name: SUNRISE OF PALM BEACH CONDOMINIUM ASSOCIATION, INC. 2

Current Principal Place of Business: New Principal Place of Business:

G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD., SUITE 309 LAKE WORTH, FL 33463 US

Current Mailing Address: New Mailing Address:

G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD., SUITE 309 LAKE WORTH, FL 33463 US

FEI Number: 59-2372309 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KATZMAN GARFINKEL ROSENBAUM ROSENBAUM MOLLENGARDEN JANSACK SARAGUSA 250 AUSTRALIAN AVE S 250 AUSTRALIAN AVE S

STE 500 STE 500

WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 33401 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: PETER MOLLENGARDEN 01/26/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP

 Name:
 STUART, ALBERT

 Address:
 7578 TAHITI LANE #206

 City-St-Zip:
 LAKE WORTH, FL 33467

Title: D

 Name:
 RESCIGNO, JOHN

 Address:
 4920 LUCERNE LAKES BLVD

 City-St-Zip:
 LAKE WORTH, FL 33467

Title: DT

Name: FRED DIAMOND
Address: 7633 TAHITI LANE, #103
City-St-Zip: LAKE WORTH, FL 33461

Title: F

 Name:
 GIANT, ROBERT

 Address:
 1578 TAHITI LANE

 City-St-Zip:
 LAKE WORTH, FL 33467

Title: DS

Name: ZACHARIA, RAE

Address: 4880 LUCERNE LAKES BLVD. 29/104

City-St-Zip: LAKE WORTH, FL 33467

Title: [

 Name:
 KLION, JEROME

 Address:
 7673 TAHITI LANE #202

 City-St-Zip:
 LAKE WORTH, FL 33467

I hereby 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 all other like empowered.

SIGNATURE: FRED GROTKE LCAM 01/26/2012