

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 13, 2007
Secretary of State**

DOCUMENT# N06000000248

Entity Name: THE SPA AT SUNSET ISLES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**21474 LINWOOD CT.
BOCA RATON, FL 33433**New Principal Place of Business:****Current Mailing Address:**21474 LINWOOD CT.
BOCA RATON, FL 33433**New Mailing Address:**902 CLINT MOORE ROAD
SUITE #110
BOCA RATON, FL 33487

FEI Number: 20-4409436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PD () Delete
Name: AGUS, JONATHAN
Address: 21474 LINWOOD CT.
City-St-Zip: BOCA RATON, FL 33433Title: VD () Delete
Name: ASHKENAZY, IZZY
Address: 21474 LINWOOD CT.
City-St-Zip: BOCA RATON, FL 33433Title: TSD () Delete
Name: NOVACKI, STEPHEN
Address: 21474 LINWOOD CT.
City-St-Zip: BOCA RATON, FL 33433**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: DR (X) Change () Addition
Name: PAMBLANCO, ERICK
Address: 21474 LINWOOD CT.
City-St-Zip: BOCA RATON, FL 33433

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: JONATHAN AGUS

PD

11/13/2007

Electronic Signature of Signing Officer or Director

Date