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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N98000002817 1. Corporation Name TOTAL SUNSET OWNER'S ASSOCIATION, INC.					
Principal Place of Business 2720 CORAL WAY MIAMI FL 33145			Mailing Address 2720 CORAL WAY MIAMI FL 33145		

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		05/15/1998	
22 City & State		27 City & State		4. FEI Number ☒ Applied For ☐ Not Applicable	
23 Zip Country		28 Zip Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Zip Country		29 Zip Country		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				81 Name DAVID SCHLOSBERG	
				82 Street Address (P.O. Box Number is Not Acceptable) TOTAL BANK BUILDING	
				83 2720 CORAL WAY	
				84 City MIAMI FL 85 Zip Code 33145	
11. Pursuant to the provisions of Sections 617.0507 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 617.0503, Florida Statutes.					
SIGNATURE <i>David Schlossberg</i> DATE APR. 29, 1999					

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☒ Addition
NAME		1.2 NAME	PD WILLIAM J. HEFFERNAN
STREET ADDRESS		1.3 STREET ADDRESS	2720 CORAL WAY
CITY-ST-ZIP		1.4 CITY-ST-ZIP	MIAMI, FL 33145
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☒ Addition
NAME		2.2 NAME	VSD DAVID SCHLOSBERG
STREET ADDRESS		2.3 STREET ADDRESS	2720 CORAL WAY
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI, FL 33145
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☒ Addition
NAME		3.2 NAME	VT DAS HECTOR VIDAL
STREET ADDRESS		3.3 STREET ADDRESS	2720 CORAL WAY
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIAMI, FL 33145
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☒ Addition
NAME		4.2 NAME	VD JORGE N. CARVALLO
STREET ADDRESS		4.3 STREET ADDRESS	2720 CORAL WAY
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MIAMI, FL 33145
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *David Schlossberg*

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR
DAVID SCHLOSBERG, VP & DIR

David Schlossberg, VP & DIR

APR. 29, 1999

(305) 476-6269
Daytime Phone #

LS

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