

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 17, 2009
Secretary of State

DOCUMENT# N07000004049

Entity Name: SUNDANCE AT PLANTATION CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**17501 BISCAYNE BLVD.
SUITE 300
AVENTURA, FL 33160**New Principal Place of Business:**3100 N W 72 AVE
SUITE 113
MIAMI, FL 33122**Current Mailing Address:**2525 PONCE DE LEON BLVD
5TH FLOOR (CONDO DEPARTMENT)
CORAL GABLES, FL 33134**New Mailing Address:**3100 N W 72 AVE
SUITE 113
MIAMI, FL 33122**FEI Number:** 20-8888363**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROLLNICK, NEIL
2525 PONCE DE LEON BOULEVARD
SUITE 400
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**SOUTH FLORIDA CONDO MANAGEMENT
3100 N W 72 AVE
SUITE 113
MIAMI, FL 33122 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: MATHEW CICERO

11/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KARSON, ARDEN
Address: 17501 BISCAYNE BLVD. #300
City-St-Zip: AVENTURA, FL 33160

Title: VD () Delete
Name: RISMILLER, TAYLOR
Address: 17501 BISCAYNE BLVD. #300
City-St-Zip: AVENTURA, FL 33160

Title: STD () Delete
Name: MOORE, PETER
Address: 17501 BISCAYNE BLVD. #300
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALOIA, ESTEBAN
Address: 3100 N W 72 AVE #113
City-St-Zip: MIAMI, FL 33122

Title: VD (X) Change () Addition
Name: CHTEINBERG, DANIEL
Address: 3100 N W 72 AVE #113
City-St-Zip: MIAMI, FL 33122

Title: STD (X) Change () Addition
Name: CIVES, JOSE L
Address: 3100 N W 72 AVE #113
City-St-Zip: MIAMI, FL 33122

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: MATHEW CICERO

RA

11/17/2009

Electronic Signature of Signing Officer or Director

Date