,2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002817

1. Entity Name

TOTAL SUNSET OWNER'S ASSOCIATION, INC.



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90531 040 ****61.25

Principal Place 2720 CORAL N MIAMI FL 3314		Mailing Address 2720 CORAL WAY MIAMI FL 33145			1 1401/10: 010 1				
2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address						
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & Sta	te	City & State			4. FEI Number 6	4. FEI Number 65-1099899 . Applied For Not Applicable			
Zip Country		Zip	Cour	ntry	5. Certificate of S	5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current	t Registered Agent	-1	الإستوب المراسسون		iress of New Registere			
				Name	7. Name and Add	ireas of Now Hegistere	Agent		
SCHLOSBERG, DAVID TOTAL BANK BLDG.					ss (P.O. Box Number is I	Not Acceptable)			
2720 CO	RAL WAY								
MIAMI FL 33145				City		F	Zip Cod	e	
BIGNATURE	Signature, typed or printed name of registered agent	9. Election C		nancing	uired when reinstating) \$5.00 May Be Added to Fees	Make Che Florida Depa	ck Payable		
10.	OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHANG	 ES TO OFFICERS AND (DIRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEFFERNAN, WILLIAM J 2720 CORAL WAY MIAMI FL 33145	☐ Delete	TITLE NAME STREE CITY-S	r address St-zip			☐ Change	Addition	
ITLE IAME STREET ADDRESS CITY-ST-ZIP	VSD SCHLOSBERG, DAVID 2720 CORAL WAY MIAMI FL 33145	Delete		ADDRESS ST-ZIP	ستعدودهم ريخ		Change	Addition &	
ITLE IAME STREET ADDRESS CITY-ST-ZIP	VTDS SPRING, LARRY M 2720 CORAL WAY MIAMI FL 33145	□ Delete	TITLE NAME STREET CITY-S	ADDRESS 272	OS E A. MARINA O CORAL WAY MI, FL 3314	5	☐ Change	⊠ Addition	
itle Iame Treet address City-St-Zip	VTD MANRARA, ALBERTO G 2720 CORAL WAY MIAMI FL 33145	☐ Delete	TITLE NAME STREET CITY-S	ADDRESS	, 12 331,		☐ Change	Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP			☐ Change	Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP		□ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP			☐ Change	Addition	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCHLOSBERG 03/10/03 (305) 476-6269