

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706002

Entity Name: SUNLAND APARTMENTS, INC. NUMBER TWO**Current Principal Place of Business:**3850 NE 21ST WAY
LIGHTHOUSE POINT, FL 33064**Current Mailing Address:**C/O JSB PROPERTY MANAGEMENT, INC
PO BOX 50373
LIGHTHOUSE POINT, FL 33074 US**FEI Number:** 59-1087722**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JSB PROPERTY MANAGEMENT, INC
2091 NE 26 STREET
BOX 50373
LIGHTHOUSE POINT, FL 33074 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:** JAMIE BLUM

05/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ZUCCARO, FRANCESCO
Address C/O JSB PROPERTY MANAGEMENT,
 INC
 PO BOX 50373
City-State-Zip: LIGHTHOUSE POINT FL 33074

Title DIRECTOR
Name BIVIANO, PATRICIA
Address C/O JSB PROPERTY MANAGEMENT,
 INC
 PO BOX 50373
City-State-Zip: LIGHTHOUSE POINT FL 33074

Title SECRETARY AND TREASURER
Name VICKI , PRISTO
Address C/O JSB PROPERTY MANAGEMENT,
 INC
 PO BOX 50373
City-State-Zip: LIGHTHOUSE POINT FL 33074

Title VP
Name HANLON, RHONDA
Address 3100 NE 48 COURT
 #111
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title DIRECTOR
Name LOBER, AARON
Address C/O JSB PROPERTY MANAGEMENT,
 INC
 PO BOX 50373
City-State-Zip: LIGHTHOUSE POINT FL 33074

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: AARON LOBER

D

05/18/2020

Electronic Signature of Signing Officer/Director Detail

Date