

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723912

Entity Name: SUNRISE TOWNE PREFERRED CONDOMINIUM, INC.

Current Principal Place of Business:

2600-5979 NW
SUNRISE, FL 33313

Current Mailing Address:

P.O. BOX 122015
FORT LAUDERDALE, FL 33312 US

FEI Number: 59-2209173

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SJW LAW GROUP, PLLC
12300 SOUTH SHORE BLVD - STE. 202
WELLINGTON, FL 33414-6202 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DIRECTOR, TREASURER
Name MORGAN, CAROLYN
Address P.O. BOX 122015
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR, SECRETARY
Name DALY, AUDRE
Address P.O. BOX 122015
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR
Name ESCUDERO, HYACINTH
Address P.O. BOX 122015
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR, PRESIDENT
Name WATSON-FOSTER, LESLEY
Address P.O. BOX 122015
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR
Name AMIR, ODED
Address P.O. BOX 122015
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR
Name KLEIN, JERRY
Address P.O. BOX 122015
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR
Name CODNER, RANDOLPH
Address P.O. BOX 122015
City-State-Zip: FORT LAUDERDALE FL 33312

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: LESLEY WATSON-FOSTER

PRESIDENT

02/27/2019

Electronic Signature of Signing Officer/Director Detail

Date