

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729230

**Entity Name:** SUNRISE LAKES CONDOMINIUM APTS., INC. 5

**Current Principal Place of Business:**

8133 SUNRISE LAKES BLVD  
SUNRISE, FL 33322

**Current Mailing Address:**

8133 SUNRISE LAKES BLVD  
SUNRISE, FL 33322

**FEI Number:** 59-1570904

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARRAGAN, HELYDA  
8133 SUNRISE LAKES BLVD  
SUNRISE, FL 33322 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:** HELYDA BARRAGAN

02/09/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BARRAGAN, HELYDA  
Address        8133 SUNRISE LAKES BLVD.  
City-State-Zip: SUNRISE FL 33322

Title            VICE PRESIDENT  
Name            PABON, DELLY  
Address        8133 SUNRISE LAKES BLVD.  
City-State-Zip: SUNRISE FL 33322

Title            2ND VICE PRESIDENT  
Name            DENEEN, GEOFFREY  
Address        8133 SUNRISE LAKES BLVD.  
City-State-Zip: SUNRISE FL 33322

Title            TREASURER  
Name            MANTILLA, LILIA  
Address        8133 SUNRISE LAKES BLVD.  
City-State-Zip: SUNRISE FL 33322

Title            ASSISTANT TREASURER  
Name            PEREZ, ENRIQUE  
Address        8133 SUNRISE LAKES BLVD.  
City-State-Zip: SUNRISE FL 33322

Title            SECRETARY  
Name            MONTERO, ROBERTO  
Address        8133 SUNRISE LAKES BLVD.  
City-State-Zip: SUNRISE FL 33322

Title            ASSISTANT TREASURER  
Name            SANCHEZ, LUZ FANNY  
Address        8133 SUNRISE LAKES BLVD.  
City-State-Zip: SUNRISE FL 33322

*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:** HELYDA BARRAGAN

**PRESIDENT**

02/09/2022

Electronic Signature of Signing Officer/Director Detail

Date