Entity Name: SUNRISE LAKES CONDOMINIUM PHASE 4, INC. 1

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## **Current Principal Place of Business:**

8211 WEST BROWARD BOULEVARD SUITE PH1, FIFTH FLOOR PLANTATION, FL 33324

**DOCUMENT# 750084** 

## **Current Mailing Address:**

8211 WEST BROWARD BOULEVARD SUITE PH1, FIFTH FLOOR PLANTATION, FL 33324 US

### FEI Number: 59-2036155

## Name and Address of Current Registered Agent:

LAW OFFICES OF EDWARD F. HOLODAK, P.A. 3326 NE 33RD STREET FORT LAUDERDALE, FL 33308 US Certificate of Status Desired: No

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	E EDWARD F. HOLODAK		02/07/2024
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	VP	Title	SECRETARY
Name	JOYCE , MADELIN	Name	PORTNEY, SHEILA
Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR	Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL 33324
Title	DIRECTOR	Title	CORPORATE SECRETARY
Name	KOPP, ANDREA	Name	VENTICINQUE, CARMINE
Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR	Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL 33324
Title	DIRECTOR	Title	DIRECTOR
Name	ROMERO, JOSE	Name	POPE, STEPHANIE
Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR	Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL 33324
Title	DIRECTOR	Title	TREASURER
Name	AGUIS, LES	Name	ABRAMOWITZ, HAL
Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR	Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL 33324

## Continues on page 2

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: CAROLYN HILL

Electronic Signature of Signing Officer/Director Detail

## FILED Feb 07, 2024 Secretary of State 6681101134CC

PRESIDENT

Date

# **Officer/Director Detail Continued :**

Title	PRESIDENT	Title	DIRECTOR
Name	HILL, CAROLYN	Name	GONZALEZ, LUZ
Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR	Address	8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL 33324
Title	DIRECTOR		

Name ELLIS, MARCIE

Address 8211 WEST BROWARD BOULEVARD SUITE PH1 FIFTH FLOOR

City-State-Zip: PLANTATION FL 33324