

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759171

Entity Name: SUNSET ISLANDS PROPERTY OWNERS, INC.**Current Principal Place of Business:**1620 NORTH VIEW DRIVE
MIAMI BEACH, FL 33140**Current Mailing Address:**2555 BAY AVENUE
MIAMI BEACH, FL 33140 US**FEI Number:** 59-0794782**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HERTZBERG, ROBERT
1620 NORTH VIEW DRIVE
MIAMI BEACH, FL 33140 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:** ROBERT HERTZBERG

06/12/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, VP
Name WALKER, PHILLIP
Address 1601 NORTHVIEW DRIVE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name PETERSON, ELLEN
Address 2560 SUNSET DRIVE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR, PRESIDENT
Name HERTZBERG, ROBERT
Address 1620 NORTH VIEW DRIVE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR, TREASURER
Name HYDE, JUDY
Address 2555 BAY AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR, SECRETARY
Name JACOBS, JODY
Address 1737 WEST 25TH STREET
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name SHORE, BEN DR.
Address 2532 REGATTA AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR, VP
Name LYONS, SPERO
Address 2500 LAKE AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name PIAZZA, MICHAEL
Address 1401 WEST 27TH STREET
City-State-Zip: MIAMI BEACH FL 33140

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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: JUDY HYDE

TREASURER

06/12/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BARON, NIKKI
Address 2526 LAKE AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name NEWMAN, JEFFREY
Address 1450 WEST 25TH STREET
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name KRAMER, KANDY
Address 1801 WEST 27TH STREET
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name NEWMAN, ROBERT
Address 2549 SUNSET DRIVE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name YULMAN, RICHARD
Address 2535 LAKE AVENUE
City-State-Zip: MIAMI BEACH FL 33140