## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29502

Entity Name: SUNRISE COMMUNITY, INC.

**Current Principal Place of Business:** 

9040 SUNSET DRIVE MIAMI. FL 33173

**Current Mailing Address:** 

9040 SUNSET DRIVE MIAMI, FL 33173 US

FEI Number: 65-0118730 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WRAY, ZACHARY 9040 SUNSET DRIVE MIAMI, FL 33173 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

**FILED** Jan 25, 2024

**Secretary of State** 

0840865041CC

Officer/Director Detail:

Title Title

YOUNG, PAULINE A WRAY, ZACHARY Name Name 12805 SW 103 CT. 9040 SUNSET DRIVE Address Address City-State-Zip: MIAMI FL 33173 MIAMI FL 33176 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name COKER, ROBERT CROWTHER, CONNIE Name

Address 4105 RIGEL'S COVE WAY Address 3612 PALMARITO STREET JENSEN BEACH FL 34957 City-State-Zip: City-State-Zip: CORAL GABLES FL 33173

Title DIRECTOR Title **DIRECTOR** 

Name MUIR, WILLIAM P Name LANK. WILLIAM

Address 1800 SOUTH OCEAN BLVD #5D 2733 NE 37TH DRIVE Address

City-State-Zip: BOCA RATON FL 33432 FT. LAUDERDALE FL 33308 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name WEINGER, STEVEN M PUJOL, ROSE B Name

1881 SO. BAYSHORE DRIVE Address 2455 SOUTH BAYSHORE DRIVE Address

City-State-Zip: MIAMI FL 33133 MIAMI FL 33133 City-State-Zip:

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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: SHERRI L. POTTER

Electronic Signature of Signing Officer/Director Detail

ASSISTANT SECRETARY

01/25/2024

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameWETHERINGTON, GLORIA ANameMORING, ROBERT HAddress2050 E. OAKLAND PARK BLVD #201Address12000 DELMAHOY DRIVECity-State-Zip:FT. LAUDERDALE FL 33306-1121City-State-Zip:CHARLOTTE NC 28777

Title DIRECTOR Title DIRECTOR

NameMCMACKIN, FRANK J IVNameHICKS, GREGORYAddress536 ALMERIA AVENUEAddress5 FAR HILLS DRIVECity-State-Zip:CORAL GABLES FL 33134City-State-Zip:AVON CT 06001

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 VANCE, KEVIN
 Name
 ARMOUR, RUSSELL

Address 3160 NE 27TH AVENUE Address 6028 SW 85TH AVENUE

City-State-Zip: LIGHTHOUSE POINT FL 33064 City-State-Zip: MIAMI FL 33143-1536

Title DIRECTOR Title DIRECTOR

Name SOUTO, JOSE E JR. Name OWENS, WILLIAM

Address 1437 SOPERA AVENUE Address 4001 TAMIAMI TRAIL NORTH

C/O BOND SCHOENECK & KING #250

City-State-Zip: CORAL GABLES FL 33143 City-State-Zip: NAPLES FL 34103

TitleASST. SECRETARYTitleDIRECTORNamePOTTER, SHERRI LNameHOLCOMB, JOHN JR.Address9040 SUNSET DRIVEAddress1410 HARBOUR WALK RD.

City-State-Zip: MIAMI FL 33173 City-State-Zip: TAMPA FL 33602

TitleDIRECTORTitleDIRECTORNameHARRIS, ASHLEYNameCOOK, EMILIE T

Address 5790 PINE BROOK RD. NE Address 370 GLENHAVEN DR.

City-State-Zip: SANDY SPRINGS GA 30328 City-State-Zip: MILLEDGEVILLE GA 31061