

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703689

FILED
Apr 21, 2009
Secretary of State

Entity Name: SUNRISE VILLA INC

Current Principal Place of Business:

915 INTRACOASTAL DRIVE
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

915 INTRACOASTAL DRIVE
FT. LAUDERDALE, FL 33304

New Mailing Address:

P.O. 122015
FT. LAUDERDALE, FL 33312

FEI Number: 59-1059587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TDSUNSHINE PROPERTY MANAGEMENT
2530 NE 15TH AVENUE
FORT LAUDERDALE, FL 33305 US

Name and Address of New Registered Agent:

TDSUNSHINE PROPERTY MANAGEMENT
4330 WEST BROWARD BLVD
SUITE I
PLANTATION, FL 33317 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: TDSUNSHINE PROPERTY MANAGEMENT

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SARGEANT, RICK
Address: 936 INTERCOASTAL DR
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: P () Delete
Name: GENOVESE, PETER MD
Address: 936 INTERCOASTAL DR
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S () Delete
Name: JUKES, TERRENCE
Address: 915 INTERNATIONAL DR
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PETER GENOVESE

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date