

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 706002 (3)
1. Corporation Name
SUNLAND APARTMENTS INC NUMBER TWO

Principal Place of Business 3851 NE 21ST AVE. LIGHTHOUSE POINT FL 33064 US	Mailing Address 3851 NE 21ST AVE LIGHTHOUSE PT FL 33064 US
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3. Date Incorporated or Qualified
08/07/1963

4. FEI Number 59-1087722	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

**RUBIN, MARGARET
3850 NE 21ST WAY #58
LIGHTHOUSE POINT FL 33064**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT - D. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEGORIA, JOHN	1.2 NAME	RAYMOND F KENNEDY
STREET ADDRESS	3880 NE 21ST WAY #42	1.3 STREET ADDRESS	3851 NE 21st. Ave., Apt. 24
CITY-ST-ZIP	LIGHTHOUSE POINT FL	1.4 CITY-ST-ZIP	Lighthouse Point, FL 33064
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETER SZELI	2.2 NAME	
STREET ADDRESS	3851 NE 21 ST AVE., APT 29	2.3 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE POINT FL	2.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN POWERS	3.2 NAME	
STREET ADDRESS	3851 NE 21 ST AVE., APT. 22	3.3 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE POINT FL	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	SECRETARY D. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOSEPH, ARTHUR	4.2 NAME	LORRAINE KEMPTON
STREET ADDRESS	3851 N.E. 21ST WAY	4.3 STREET ADDRESS	3851 NE 21st. Ave., Apt. 30
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064	4.4 CITY-ST-ZIP	Lighthouse Point, FL 33064
TITLE	TD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBIN, MARGARET	5.2 NAME	
STREET ADDRESS	3850 NE 21ST WAY #58	5.3 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE POINT FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Raymond F Kennedy* **RAYMOND F KENNEDY** FEB. 4, 1998 954-941-4688

CP2E037 (10/97)