

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711928

FILED
Apr 19, 2009
Secretary of State

Entity Name: NORTH SUNRISE, INC., A CONDOMINIUM ASSOCIATION

Current Principal Place of Business:

301 SUNRISE DRIVE
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

301 SUNRISE DRIVE
APT DE
KEY BISCAYNE, FL 33149

New Mailing Address:

301 SUNRISE DRIVE
MGRS. BOX
KEY BISCAYNE, FL 33149

FEI Number: 59-1350075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN REALTY, INC
2050 CORAL WAY SUITE 305
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MOHAMED, LUCIA
Address: 4269 S.W. 157TH CT
City-St-Zip: MIAMI, FL 33185

Title: SD () Delete
Name: CAMERON, DORIS
Address: 301 N SUNRISE DR #5B-E
City-St-Zip: KEY BISCAYNE, FL 33149

Title: TD () Delete
Name: GUTTIEREZ, MARI
Address: 785 CRANDON BLVD #206
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: QUIRCH, JOSEPHINA
Address: 301 N SUNRISE DR #3-AE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: LUACES, LOURDES
Address: 165 BUTTONWOOD DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HENNIGAN, BARBARA
Address: 301 N. SUNRISE DR. , #2-BW
City-St-Zip: KEY BISCAYNE, FL 33149

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

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

Title: D (X) Change () Addition
Name: QUIRCH, JOSEPHINA
Address: 301 N SUNRISE DR #3-AE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP (X) Change () Addition
Name: LUACES, LOURDES
Address: 165 BUTTONWOOD DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Change (X) Addition
Name: MOHAMED, LUCIA
Address: 4269 S.W. 157TH. CT.
City-St-Zip: MIAMI, FL 33185

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: BARBARA HENNIGAN

P

04/19/2009

Electronic Signature of Signing Officer or Director

Date