2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722195

FILED Apr 12, 2012 Secretary of State

Entity Name: SUNSET ISLE MAINTENANCE ASSN. 13, INC.

Current Principal Place of Business: New Principal Place of Business:

299 WEST CAMINO GARDENS BLVD #203 11784 WEST SAMPLE ROAD

BOCA RATON, FL 33432 SUITE 103

CORAL SPRINGS, FL 33065 US

Current Mailing Address: New Mailing Address:

299 WEST CAMINO GARDENS BLVD #203 11784 WEST SAMPLE ROAD

BOCA RATON, FL 33432 SUITE 103

CORAL SPRINGS, FL 33065 US

FEI Number: 59-1426246 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEVENS & GOLDWYN PA UNITED COMMUNITY MANAGEMENT CORP.

2 S UNIVERSITY DR 11784 WEST SAMPLE ROAD 315 SUITE 103

PLANTATION, FL 33324 US CORAL SPRINGS, FL 33065 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: ANA MONTOYA 04/12/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: SEGAL, SAM

Address: 11784 WEST SAMPLE ROAD #103 City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: VP

Name: KAY, JOHN

Address: 11784 WEST SAMPLE ROAD #103 City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: VP

Name: RUTOWICZ, NICKOLAS

Address: 11784 WEST SAMPLE ROAD #103 City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: T

Name: DESIDERIO, JOHN

Address: 11784 WEST SAMPLE ROAD #103 City-St-Zip: CORAL SPRINGS, FL 33065 US

Title:

Name: SHAW, JOANNE

Address: 11784 WEST SAMPLE ROAD #103 City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: D

Name: DOWNS, BARBARA

Address: 11784 WEST SAMPLE ROAD #103 City-St-Zip: CORAL SPRINGS, FL 33065 US

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: ANA MONTOYA D 04/12/2012