2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 02, 2009
Secretary of State

DOCUMENT# 730498

Entity Name: SUNRISE #2 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

973 NE 41 AVE
HOMESTEAD, FL 33033 US

New Principal Place of Business:

Current Mailing Address:

973 NE 41 AVE
HOMESTEAD, FL 33033 US

New Mailing Address:

PO BOX 901213
HOMESTEAD, FL 33090 US

FEI Number: 59-1584293 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZAYAS, JOSIANN
973 NE 41 AVE
HOMESTEAD, FL 33033 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: MRS. ( ) Delete
Name: ZAYAS, JOSIANN
Address: 973 NE 41 AVE
City-St-Zip: HOMESTEAD, FL 33033 US

Title: MR. ( ) Delete
Name: HALIM, RAFAEL
Address: PO BOX 970606
City-St-Zip: MIAMI, FL 33197

Title: MR. ( ) Delete
Name: CALVO, CARLOS
Address: 9365 SW 21 STREET
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/T (X) Change ( ) Addition
Name: ZAYAS, JOSIANN
Address: 973 NE 41 AVE
City-St-Zip: HOMESTEAD, FL 33033 US

Title: P (X) Change ( ) Addition
Name: HALIM, RAFAEL
Address: PO BOX 970606
City-St-Zip: MIAMI, FL 33197

Title: VP (X) Change ( ) Addition
Name: CALVO, CARLOS
Address: 9365 SW 21 STREET
City-St-Zip: MIAMI, FL 33165

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: JOSIANN ZAYAS S/T 09/02/2009

Electronic Signature of Signing Officer or Director — Date