2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#736902

FILED Feb 17, 2009 Secretary of State

Entity Name: SUNRISE LAKES CONDOMINIUM ASSOCIATION PHASE I, INC.

Current Principal Place of Business: New Principal Place of Business: 8100 SUNRISE LAKES DRIVE NORTH SUNRISE, FL 33322 **Current Mailing Address: New Mailing Address:** 8100 SUNRISE LAKES DRIVE NORTH 8100 SUNRISE LAKES DRIVE NORTH SUNRISE, FL 333221643 US SUNRISE, FL 33322 FEI Number: 59-1570931 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: CARAVELLA, LOUIS 8100 SUNRIŚE LAKES DRIVE NORTH SUNRISE, FL 33322 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CARAVELLA, LOUIS Name: Name: 2700 SUNRISE LAKES DRIVE WEST Address: Address: City-St-Zip: SUNRISE, FL 33322 US City-St-Zip: Title: () Delete Title: 1VD (X) Change () Addition Name: BRENNER, RICHARD P Name: OSBORNE, GARY Address: 2950 SUNRISE LAKES DRIVE WEST Address: 8040 SUNRISE LAKES DR., NORTH City-St-Zip: SUNRISE, FL 33322 US City-St-Zip: SUNRISE, FL 33322 US Title: () Delete Title: () Change () Addition BUCCI, DOMINICK Name: Name: 3001 SUNRISE LAKES DR E Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33322 City-St-Zip: Title: () Delete Title: VP2 () Change (X) Addition Name: Name: ZAMBERNARDI, DIANE 2901 SUNRISE LAKES DR., EAST Address: Address: City-St-Zip: City-St-Zip: SUNRISE, FL 33322

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: LOUIS CARAVELLA PD 02/17/2009