

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 29, 2001 8:00 am**  
**Secretary of State**

01-29-2001 90147 002 \*\*\*\*61.25

**DOCUMENT # 741282**

1. Entity Name

**SUNRISE LAKES CONDOMINIUM APTS., PHASE 3, INC. 4**

Principal Place of Business

2700 NW 94TH WAY  
 SUNRISE FL 33322

Mailing Address

2700 NW 94TH WAY  
 SUNRISE FL 33322

**907549**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-1854370**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RADOSTA, JACK CAM**  
**2700 NW 94TH WAY**  
**SUNRISE FL 33322**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  Delete  
 NAME SHEINER, BELLE  
 STREET ADDRESS 9541 SUNRISE LAKES BLVD  
 CITY-ST-ZIP SUNRISE FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE VD  Delete  
 NAME TROY, MARY  
 STREET ADDRESS 9481 SUNRISE LAKES BLVD.  
 CITY-ST-ZIP SUNRISE FL 33322

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE TD  Delete  
 NAME GREENBAUM, MARVIN  
 STREET ADDRESS 9440 SUNRISE LAKES BLVD  
 CITY-ST-ZIP SUNRISE FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE SD  Delete  
 NAME BECK, LEONA  
 STREET ADDRESS 9541 SUNRISE LAKES BLVD  
 CITY-ST-ZIP SUNRISE FL 33322

TITLE  Change  Addition  
 NAME *SD Rubin, Yvette*  
 STREET ADDRESS *9541 Sunrise Lakes Blvd*  
 CITY-ST-ZIP *Sunrise, FL 33322*

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Belleville Sheiner, Pres.* 1/15/01 (954) 741-1338  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)