

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744822

FILED
Feb 25, 2010
Secretary of State

Entity Name: SUNSHORES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3527 NE 168 ST
N. MIAMI BEACH, FL 33160

New Principal Place of Business:

790 WEST 20TH STREET
2ND FLOOR
MIAMI, FL 33010

Current Mailing Address:

3527 NE 168 ST
N. MIAMI BEACH, FL 33160

New Mailing Address:

790 WEST 20TH STREET
2ND FLOOR
MIAMI, FL 33010

FEI Number: 59-1923907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, DAVID B
3527 NE 168 ST
404
MIAMI, FL 33160 US

Name and Address of New Registered Agent:

FOUR POINTS PROPERTY MANAGEMENT, INC.
790 WEST 20TH STREET
2ND FLOOR
HIALEAH, FL 33010 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: FOUR POINTS PROPERTY MANAGEMENT, INC.

02/25/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD
Name: SLOAN, MARK
Address: 790 WEST 20TH STREET
City-St-Zip: HIALEAH, FL 33010

Title: D
Name: TORRES, RAYMOND
Address: 790 WEST 20TH STREET
City-St-Zip: HIALEAH, FL 33010

Title: D
Name: IVANOV, MLADEN
Address: 790 WEST 20TH STREET
City-St-Zip: HIALEAH, FL 33010

Title: PD
Name: GREEN, MARILYN
Address: 790 WEST 20TH STREET
City-St-Zip: HIALEAH, FL 33010

Title: D
Name: AMORES, ALINA
Address: 790 WEST 20TH STREET
City-St-Zip: HIALEAH, FL 33010

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: MARK SLOAN

D

02/25/2010

Electronic Signature of Signing Officer or Director

Date