2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748746

FILED Jul 07, 2008 Secretary of State

Entity Name: SUNSHINE CONDOMINIUM APTS., INC.

Current Principal Place of Business:		New Principal Place of Business:	
	I BUREN STREET OOD, FL 33020 US		
Current Mailing Address:		New Mailing Address:	
	RAGUT STREET OOD, FL 33021		
	r: 59-2010072	Number Not Applicable () Certificate of Status Desired ive the prior notice.	()
Name an	d Address of Current Registered Agent:	Name and Address of New Registered Agent:	
1501 N.W SUITE 20 FT. LAUD The above	DERDALE, FL 33309 US e named entity submits this statement for the purpor	se of changing its registered office or registered agent, o	r both,
in the Stat	te of Florida.		
SIGNATU	RE:		
	Electronic Signature of Registered Agent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRI	ECTORS
Title: Name: Address: City-St-Zip:	DP () Delete ELLIAS, JAMES 2829 VAN BUREN STREET HOLLYWOOD, FL 33020 US	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	DS () Delete BRUNETT, LORETTA 3896 FARRAGUT STREET HOLLYWOOD, FL 33021	Title: DS (X) Change () Addition Name: SABBAGH, TAMARA Address: 3896 FARRAGUT STREET City-St-Zip: HOLLYWOOD, FL 33021	
Title: Name: Address: City-St-Zip:	DT () Delete CHUCK, DERRICK 3896 FARRAGUT STREET HOLLYWOOD, FL 33021	Title: () Change () Addition Name: Address: City-St-Zip:	
O.t.) Ot 2.p.	D () Delete	Title: () Change () Addition Name:	
Title: Name: Address: City-St-Zip:	WINKELHOLZ, RICK 2829 VAN BUREN STREET HOLLYWOOD, FL 33020	Address: City-St-Zip:	
Title: Name: Address:	2829 VAN BUREN STREET	Address:	

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: DERRICK CHUCK DT 07/07/2008