2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2006 8:00 am
Secretary of State
02-09-2006 90023 029 ****61.25

DOCUMENT # 753310

1. Entity Name

SUNRISE SPRINGS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3712 N.W. 88TH AVE. SUNRISE FL 33351	3712 N.W. 88TH AVE. SUNRISE FL 33351

1st MOORE CR2E037 (10/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2143276 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STANLEY & OTTO, P.A.
3990 SHERIDAN STREET
SUITE 109
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CAPODLUPO, ARNOLD 3730 N.W. 88 AVE #238 SUNRISE FL 33351	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P TONI SANTUCCI 3700 N. W. 88 AVE. #205 SUNRISE, FL. 33351	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SCOTT, BETTY 3700 N.W. 88 AVE #112 SUNRISE FL 33351	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V. MILDRED DROZ 3710 N. W. 88 AVE. #320 ~~SUNRISE, FL. 33351~~	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FRIEDMAN, MATTIE 3700 N.W. 88 AVE #204 SUNRISE FL 33351	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MATTIE FRIEDMAN 3700 N. W. 88 AVE. #204 SUNRISE, FL. 33351	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RODRIGUEZ, RUTH 3720 N.W. 88 AVE #337 SUNRISE FL 33351	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DAVID REFF 3700 N. W. 88 AVE. #221 SUNRISE, FL. 33351	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RODRIGUEZ, EDMUNDO 5141 S.W. 14 ST PLANTATION FL 33317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EDMUNDO E RODRIGUEZ 5141 S. W. 14 ST. PLANTATION, FL. 33317	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PR CAPODILUPO, ARNOLD 3730 N.W. 88 AVE #238 SUNRISE FL 33351	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Toni A. Santucci 2.28.06 (954) 742-2500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #