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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	SUNRISES	PRINES Conoso	MINIUM ASSOCIATION I
DOCUMENT NUMBER: FE			
The enclosed Articles of Amendme	•	_	
Please return all correspondence co	ncerning this matter t	to the following:	
J	Seph E (Name of Co	SARGE (ntact Person)	
***************************************	(Fi/ C	ompany)	
	(Fiffi) C	ompany)	
370	HOB W 10 OC (Add	¹ <u>avenue</u> r	4pT.302
Sun	RISE F. (City/ State a	Lorida 33 nd Zip Code)	351
SU E-mail a	RPV104 (ddress: (to be used for	ADL.COM	notification)
For further information concerning	this matter, please ca	11:	
Joseph Bo (Name of Contact Per	rson)	at (954) 5 (Area Code &)	513-8767 Daytime Telephone Number)
Enclosed is a check for the following	g amount made paya	ble to the Florida Depa	rtment of State:
\$35 Filing Fee \$43.75 F Certificate	Filing Fee & of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231		Street Address Amendment Set Division of Cor Clifton Building 2661 Executive Tallahassec, FL	ction porations 3 Center Circle

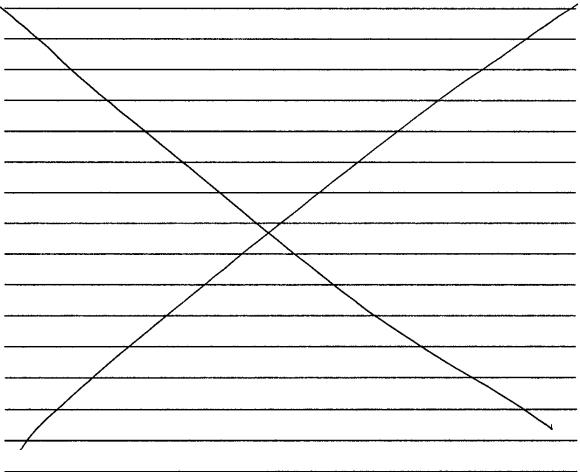
Articles of Amendment to Articles of Incorporation of

بے ۔
SUNPLISE SPRINGS CONDOMINIUM ASSOCIATION THE
(Name of Corporation as currently filed with the Florida Dept. of State)
FEI/592143276 753310 器 F M
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:
Sin Sin
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the
abbreviation "Corp." or "Inc." "Company" or "Co," may not be used in the name.
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable:
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent: Trip Scott, P.A. c/o Matthew Zfrony, Es
110 SE Comst. 15th Frace
New Registered Office Address: (Florida street address)
Ft. Laudurdak, Florida 3330)
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the
position.
Signature of New Registered Agent, if changing

Page 1 of 3

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

(Anach aaa	monai sneets, ij necessary)		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>vr</u>	DROZ, MILDRED	3710 NW 88th = 320 Sunrüe FL 33351	Add Remove
- Ρ	Friedman, Mathe	3700 N W 8841 line # 20	- ∯
D	Johnson, Kirk	3700 NW 88th and Apt. # 407 SUNTISE FL 33351	_ □ Add _ ☑ Remove
	ling or adding additional Articles, ente dditional sheets, if necessary). (Be spec	r change(s) here:	onal outacled)



If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

•	, , , , , , , , , , , , , , , , , , ,		
<u>Title</u>	Name	Address	Type of Action
<u>S</u> _	HASIN, Jody Scott, Judith	3710 N W 88 Th Quence Apt. # 407	Ađd Remove
T	Scott, Judith	3730 NW 884M OWN Apt. 443 Sunrise FL 33351	_ □ Add _ ☑ Remove
P	Joseph BarbE	3700 NW88 Mane. Apt. # 302 SUNCSE FC 33351	Add Company
		(See od	dutional attack
	ding or adding additional Articles, ento dditional sheets, if necessary). (Be spe		
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			· · · · · · · · · · · · · · · · · · ·

Page 2 of 3

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary) **Title** Name <u>Address</u> Type of Action VIVIAN BERRIOS 3720 NW 88 th Oul. Z Add ☐ Remove STEVE MAYSONET
LEOVIGE MARCEllo 3720 NW88+howe 12 Add 3700NW 884 aue (See additional attacked) E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
	Mark Poth	3710 NW88 Th angue Appt. # 119 Sunfise, FL 33351	Add Remove
	·.		Add Remove
			☐ Add ☐ Remove
E. Mamendin (attach addi	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific	change(s) here:	
			
			
			
		X	
			
			<u> </u>
			
			
	/	· · · · · · · · · · · · · · · · · · ·	

• •	$(1/3 \circ 1 \circ 0)$
The date of each amendment(s):	adoption: 9/35/09
	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were awas/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s)
There are no members or mem adopted by the board of directors	abers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated / O	-13-09 1 / B
(By the	chairman or vice chairman of the board, president or other officer-if directors been selected by an incorporator – if in the hands of a receiver, trustee, or burt appointed fiduciary by that fiduciary) (Typed or printed name of person signing)
	(Title of person signing)

Page 3 of 3

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753310

FILED Jun 28, 2009 Secretary of State

Entity Name: SUNRISE SPRINGS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

3712 N.W. 88TH AVE. SUNRISE, FL 33351

Current Mailing Address:

New Mailing Address:

Name: Jaseph Bara

Title: S

3712 N.W. 88TH AVE. SUNRISE, FL 33351

FEI Number: 59-2143276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Change () Addition

Change, () Addition

OFFICERS AND DIRECTORS:

Title: Name: Address:

M Delete DROZ, MILDRÉD

3710 NW 88TH AVE. # 320 City-St-Zip: SUNRISE, FL 33351

Title: Name:

(V) Delete FRIEDMAN, MATTIE

Address: 3700 N.W. 88 AVE #204 SUNRISE, FL 33351 City-St-Zip:

Title: Name: Address:

(V) Delete JOHNSON, KIRK 3700 NW 88TH AVE #407

City-St-Zip:

SUNRISE, FL 33351

Title: Name: Address:

HASIN, JODY 3710 NW 88TH AVE #407

(V) Delete

City-St-Zip: SUNRISE, FL 33351

Title: Name: Address: City-St-Zip:

(V) Delete SCOTT, JUDITH 3730 NW 88 AVE #443 SUNRISE, FL 33351

Title:√₽

(V) Change () Addition Name: STEVE MAYSONET
Address: 3730 NW 884N OWL \$306
City-St-Zip: Sunrise, FL 33351

Address: 3760 NW 88th and +302

City-St-Zip: Sunkise fl 33351

City-st-Zip: sunrise FL 33351

(Change () Addition Title: T Name: George Marcello Address: 3700 N W 88 th aug # 306 City-St-Zip: sunnise FL >>351

Name: VIVIAN BERRIOS Zelaya Address: 3720 NW 88th ST. Apt. 206

Title: D Change () Addition Name: HORK ROTH Address: 3710 NW88 th and \$ 119 city-st-Zip: sunrise, FL 33351

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.

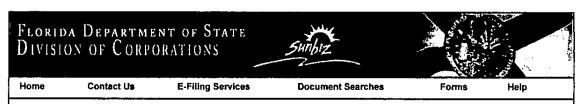
SIGNATURE: JOSEPH R. PADRON

CPA

06/28/2009

Electronic Signature of Signing Officer or Director

Date



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Detail by Entity Name

Florida Non Profit Corporation

SUNRISE SPRINGS CONDOMINIUM ASSOCIATION, INC.

Filing Information

Document Number 753310

FEI/EIN Number 592143276

Date Filed State

07/11/1980 FL

Status

ACTIVE

Principal Address

3712 N.W. 88TH AVE. SUNRISE FL 33351

Changed 05/04/1989

Mailing Address

3712 N.W. 88TH AVE. SUNRISE FL 33351

Changed 05/04/1989

Registered Agent Name & Address

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

Name Changed: 03/18/2004

Address Changed: 08/06/1997

Officer/Director Detail

Name & Address

Title VP

DROZ, MILDRED 3710 NW 88TH AVE, # 320 SUNRISE FL 33351

Title P

FRIEDMAN, MATTIE 3700 N.W. 88 AVE #204 SUNRISE FL 33351

Title D

JOHNSON, KIRK 3700 NW 88TH AVE #407 SUNRISE FL 33351

Title S

HASIN, JODY 3710 NW 88TH AVE #407 SUNRISE FL 33351

SCOTT, JUDITH

3730 NW 88 AVE #443 SUNRISE FL 33351			
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