2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2003 8:00 am
Secretary of State
04-21-2003 90474 005 ****70.00

DOCUMENT # 759150

1. Entity Name
THE SUNSET HARBOUR HOMEOWNERS' ASSOCIATION, INC.

55041969

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
C/O TPS MANAGEMENT P O BOX 661554 MIAMI SPRINGS FL 33266 US	C/O TPS MANAGEMENT P O BOX 661554 MIAMI SPRINGS FL 33266 US

2. Principal Place of Business	3. Mailing Address
Courtesy Property Mgmt.	13250 SW 135 Str.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Miami, FLorida
Zip / Country	Zip: 33186 / Country: USA

4. FEI Number 65-0106527 ☐ Applied For ☐ Not Applicable

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
SKRLD INC 201 ALHAMBRA CIRCLE SUITE 1102 CORAL GABLES FL 33134	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 _____
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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CRISTANTO, MEMBRENO 6420 SW 127 PLACE MIAMI FL 33183	☒ Delete	President DIRECTOR Jose Racines 12785 SW 59 Str. Miami, FL 33183	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LILLIAM, SIERRA M 12752 SW 64 TERRACE Z MIAMI FL 33183	☒ Delete	Vice President D Danilo Allard 12893 SW 60 Terr. Miami, FL 33183	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD AMAURIS, RODRIGUEZ 6519 SW 129 AVE MIAMI FL 33183	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOHAMED, HALLAJ 6519 SW 129 AVE MIAMI FL 33183	☒ Delete	Director Antonio LOzado 6044 SW 127 Pl. Miami, FL 33183	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SWARTZ, ROBERT JR 12849 SW 65 STREET MIAMI FL 33183	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #