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

DOCUMENT # 762123

1. Entity Name

SUNSHINE HOLIDAY HOMEOWNERS ASSOCIATION. INC.



FILED Feb 13, 2003 8:00 am Secretary of State

02-13-2003 90274 004 ****61.25

SOMPHINE HOLIDAT HOMEOWNER	is association, inc.		
Principal Place of Business	Mailing Address		
2801 NW 30TH COURT OAKLAND PARK FL 33311 US	2801 NW 30TH COURT OAKLAND PARK FL 33311 US		L MARINI MARIN SENIA NYAKI KARIN KARAN KAN ANDIK RIBIN AKAN ANDIK ANDIK ANDIK ANDIK ANDIK ANDIK ANDIK ANDIK AN
2. Principal Place of Business 2183 N.W. 29th Street	3. Mailing Address 2185 N. W. 2977	h STRET	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business 3. Mailing Address											
		Th STR	ēΙ								
Suite, Apt. #, etc. Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES							
City & State Park BLWD FL OAKLAND Park			4. FEI Number 65-0078928 Applied For Not Applicable								
^{Zip} 33311	Country FT LAUDE TO A LE	Zip Country FL 33311 FLAWERSALE			5. Certificate of Status Desired						
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
Name LA					CHANCE FERNANDO						
CHARLEBOIS, REJEAN			Str	Street Address (P.O. Box Number is Not Acceptable)							
2801 N.W. 30TH COURT OAKLAND PARK FL 33311				2783 N.W. 29THSTREET							
OAKLAND PARK FL 33311				OAKIAND PARK BLVD City EI Zip Code							
					FT Lauderdale FL Zip Code 33311						
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											
the obligations of registered agent.											
SIGNATURE Keen Is havet FERNANDO LACHANCE Od/11/03											
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE		t signature required			DATE				
<u> </u>											
FILE NOW: FEE IS \$61.25				ing	\$5.00 May Be	Make	Check Payable	to			
Trust Fund Contribution.					Added to Fees	Florida I	Department of S	itate			
10. OFFICERS AND DIRECTORS 11.					ADDITIONS/CHANGE	ES TO OFFICERS A	AND DIRECTORS IN	10			
10.	P OFFICERS AND DIA	☐ Delete	TITLE		sident	ES TO OTTIOENS	Change	☐ Addition			
NAME	LEGAULT, ANDRE	□ Delete	NAME	ORT	Janny_						
STREET ADDRESS	3007 N.W. 28TH LANE		STREET ADD	RESS 284	9 30Th C	porg .	_	1			
CITY-ST-ZIP	OAKLAND PARK FL 33311		CITY-ST-ZI		LAND Gurk	c Blud 3	<u> </u>				
TITLE	D	☐ Delete	TITLE		E- PRESide		Change	☐ Addition			
NAME	GALIPEAULT, LUCIEN		NAME STREET ADD	53h	nefer He 8 LANE 28	RNHNN ath W W					
STREET ADDRESS CITY-ST-ZIP	3024 N.W. 28TH TERRACE OAKLAND PARK FL 33311		CITY-ST-Z		land Park		11				
TITLE	TD	☐ Delete	TITLE		ASURER	<u> </u>	☐ Change	☐ Addition			
NAME	LACHANCE, FERNANDO	□ pelege.	NAME	LAC	HANCE FO	SCHANDO	onange				
STREET ADDRESS	2783 N.W. 29TH STREET		STREET ADD	RESS 2.48	13 N.W. 29	Th STreeT	_				
CITY-ST-ZIP	OAKLAND PARK FL 33311		CITY-ST-Z		IAND PARK	BIVE FL	. ਹੋਤੇਤੇ //				
TITLE	\$	☐ Delete	TITLE		retary Ite Lorri	عسته	☐ Change	☐ Addition			
NAME STREET ADDRESS	MATTE, LORRAINE 2764 NW 29TH STREET		, name Street add	H 47	4 1. 25	Th STORE	_				
CITY-ST-ZIP	OAKLAND PARK FL 33311		CITY-ST-Z	OAK	JAND PARK	DLV.D	33311	}			
TITLE	D	□ Delete	TITLE		ector	03.0	Change	☐ Addition			
NAME	SCHAEFER, HERMANN		NAME	300	Chand, Cli	aude		_			
STREET ADDRESS	3028 LANE 28TH N.W.		STREET ADD	RESS 246	rand, Cli	ath Since	\mathcal{T}				
CITY-ST-ZIP	OAKLAND PARK FL 33311		CITY-ST-ZI		land Par		<u> </u>				
TITLE	D PUADDAT HATEM	☐ Delete	TITLE	seh	oen rock	Jonnie	Change	☐ Addition			
NAME STREET ADORESS	KHABBAZ, HATEM 3002 28TH WAY		NAME STREET ADD	RESS 294	DI 28Th AVE	Also					
CITY-ST-ZIP	OAKLAND PARK FL 33311		CITY-ST-ZI	OAK.	LAND PATK	NIVY	333//				
	AUNITAIN I VIIII IE 00011			17014	E CIVI		- J-				

12. I hereby certify that the information supplied with this filling 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