

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 05, 2001 8:00 am
Secretary of State

04-05-2001 90044 030 ***150.00

DOCUMENT # F00000005551

1. Entity Name

SUNRISE HEALTHCARE CORPORATION OF DELAWARE

Principal Place of Business

**7061 CYPRESS ROAD, #104
 PLANTATION FL 33317**

Mailing Address

**7061 CYPRESS ROAD, #104
 PLANTATION FL 33317**

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 **65-1010070**

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

**BARRON, ROBERT W
 350 EAST LAS OLAS BOULEVARD, SUITE 1000
 FORT LAUDERDALE FL 33301**

Name

BURRIER, Vicki

Street Address (P.O. Box Number is Not Acceptable)

7061 Cypress Road, Ste. 104

City

Plantation, FL

FL

Zip Code

33317

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.

SIGNATURE

Vicki Burrier

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/02/01

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PCEO** ☐ Delete
 NAME **SPIRA, LAWRENCE R M.D.**
 STREET ADDRESS **7061 CYPRESS ROAD, #104**
 CITY-ST-ZIP **PLANTATION FL 33317**

TITLE **S** ☐ Change ☒ Addition
 NAME **Vicki Burrier**
 STREET ADDRESS **7061 Cypress Road, Suite 104**
 CITY-ST-ZIP **Plantation, Florida 33317**

TITLE **S** ☒ Delete
 NAME **BARRON, ROBERT W**
 STREET ADDRESS **350 EAST LAS OLAS BOULEVARD, SUITE 1000**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Vicki Burrier

VICKI BURRIER

4/02/01

Date

(954) 474-7701

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)

**Sunrise Healthcare Corporation
Of Delaware**

Attachment
940867
F00600005551

April 2, 2001

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Document #: F00000005551
Sunrise Healthcare Corporation of Delaware

Dear Sir or Madam:

Please see the following change on the referenced UBR for the Registered agent

Vicki Burrier
7061 Cypress Road, Suite 104
Plantation, Florida 33317
Tel. No. (954) 474-7701

Also, please delete Robert W. Barron as secretary and add Vicki Burrier (above) in this position.

If you have any questions, please contact me at the number listed above.

Sincerely,



Marlene Carre
Assistant Controller