

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 20, 2009
Secretary of State**

DOCUMENT# N04000010316

Entity Name: SUNSET LAKE ESTATES II HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

8600 NW 17 STREET
SUITE 145
DORAL, FL 33126

New Principal Place of Business:

Current Mailing Address:

8600 NW 17 STREET
SUITE 145
DORAL, FL 33126

New Mailing Address:

FEI Number: 65-0933433 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERLO, MIRIAM
420 SOUTH DIXIE HIGHWAY, 3RD FLOOR
SUITE 265-S
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HART-LOPEZ, JACQUELINE
Address: 16325 SW 70 STREET
City-St-Zip: MIAMI, FL 33193

Title: VP () Delete
Name: CARRION, ORLANDO
Address: 70035 SW 162 PATH
City-St-Zip: MIAMI, FL 33193

Title: T () Delete
Name: RUIDIAZ, PATRICIA
Address: 16374 SW 68 TERRACE
City-St-Zip: MIAMI, FL 33193

Title: S () Delete
Name: ENEIDA, ORTESA
Address: 6930 SW 163 PL
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JACQUELINE HART-LOPEZ

P

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date