

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003783

FILED
Jan 07, 2009
Secretary of State

Entity Name: SORRENTO LAKES AT SUNRISE POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1145 SAWGRASS CORP PARKWAY
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

1145 SAWGRASS CORP PARKWAY
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 20-2812600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 NORTH COMMERCE PARKWAY
WESTON, FL 33326 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: VARGAS, SANDRA
Address: 4013 NW 90 AVE.
City-St-Zip: SUNRISE, FL 33351

Title: V () Delete
Name: MC COY, ELIZABETH
Address: 3817 N.W. 90TH AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: T () Delete
Name: BAYER, CAROLE
Address: 3809 N.W. 90TH AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: S () Delete
Name: DUFFY, ANGELICA
Address: 3856 N.W. 90TH AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: D () Delete
Name: PACHELLI, MICHAEL
Address: 3868 N.W. 90TH AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GARRAFA, CARLOS
Address: 3864 NW 90 AVE.
City-St-Zip: SUNRISE, FL 33351

Title: VP (X) Change () Addition
Name: MC COY, ELIZABETH
Address: 3817 N.W. 90TH AVENUE
City-St-Zip: SUNRISE, FL 33351

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: D () Change (X) Addition
Name: WARREN, BERTRAM
Address: 3876 NW 90 AVE
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: ELIZABETH MC COY

VP

01/07/2009

Electronic Signature of Signing Officer or Director

Date