

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000003783

**FILED**  
**Jan 31, 2011**  
**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:** D  
**Name:** DANIEL, DANIEL  
**Address:** 1145 SAWGRASS CORPORATE PARKWAY.  
**City-St-Zip:** SUNRISE, FL 33323

**Title:** P  
**Name:** GRIECO, WILLIAM  
**Address:** 1145 SAWGRASS CORPORATE PARKWAY  
**City-St-Zip:** SUNRISE, FL 33323

**Title:** T/S  
**Name:** BAYER, CAROLE  
**Address:** 1145 SAWGRASS CORPORATE PARKWAY  
**City-St-Zip:** SUNRISE, FL 33323

I hereby 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 all other like empowered.

**SIGNATURE:** CAROLE BAYER

T/S

01/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date