## **2008 NOT-FOR-PROFIT CORPORATION**

## **ANNUAL REPORT**

## DOCUMENT # N06000003729

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUNSET LAKE TOWNHOMES HOMEOWNER'S



**FILED** Feb 04, 2008 8:00 am Secretary of State

02-04-2008 90039 004 \*\*\*\*61.25

ASSOCIATION, INC.							<b>'</b>				
Principal Place of Business 3650 N.W. 82 AV. SUITE 402 MIAMI, FL 33166				g Address 550 NW 822 M, FL 33166	AV SI	UITE 402	7				
Principal Place of Business - No P.O. Box # 3. Mailing Address											
						t inmiliat ett mat	m ailit aniti aniis nst	il mælte mætem	afilis i Arabian i Falicae e an ii	(8) 31 (6)	
Suite, Apt. #, etc.				ite, Apt. #, etc.		01302008	Chg-NP 、	CR2E0	37 (12/06)		
City & State				City & State			4. FEI Number 20-852	9778		<u>_</u>	plied For Applicable
Zip Country			Zij	p	Cou	untry	5. Certificate of	Status Desired		\$8.75 Add Fee Required	
6. Name and Address of Current Regist							7. Name and Address of New Registered Agent				
ALO MARIA I						Name					
ALO, MARIA L 6267 SW 40TH ST.						Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL 33155									<del> </del>		
						City			FL	Zip Code	·
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, and accept											
the obligations of registered agent.											
SIGNATURE Signature, typed or printed same of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
Filing Fee is \$61.25 9. Election Campaign I  Due by May 1, 2008 Trust Fund Contribu							\$5.00 May Be Added to Fees			k payable to rtment of St	
10.		OFFICERS AND DI	RECTORS	S	11.		ADDITIONS/CHAN	GES TO OFFICE	RS AND D	IRECTORS IN	10
TITLE	D			Delete	TITE	i				Change	Addition
NAME CTREET ADDRESS	AME BARON, CESAR TREET ADDRESS 8181 NW 36TH ST., SUITE 1001				NAN	AE EET ADDRESS	-				
CITY-ST-ZIP MIAMI, FL 33166						Y-ST-ZIP					
TITLE	D			☐ Deicte	TITU	.E				Change	Addition
NAME	ME BARON, LINA M				NAN	AE .					_
STREET ADDRESS 8181 NW 36TH ST., SUITE 1001			ļ.		1	EET ADDRESS					
CITY-ST-ZIP					CITY	Y-ST-ZIP					
TITLE   NAME	SD	ANO, CARMEN		☐ Delete	TITL Nak	1				Change	Addition
STREET ADDRESS		36TH ST., SUITE 1001	l			EET ADDRESS					
CITY-ST-ZIP	MIAMI, FL					Y-ST-ZIP					
TITLE				☐ Delete	TITL	LE				☐ Change	☐ Addition
NAME					NAM						
STREET ADDRESS CITY-ST-ZIP		,			- 4	NEET ADDRESS Y-ST-ZIP					
TITLE				☐ Delete						Change	Addition
NAME				□ Delété	TITI	I .				change	
STREET ADDRESS		v				REET ADDRESS					
CITY-ST-ZIP					CIT	Y-ST-ZIP					
TITLE				Delete	TITI	1				Change	☐ Addition
NAME STREET ADDRESS					NA						
CITY-ST-ZIP	1					REET ADORESS Y-ST-ZIP					
12. Thereby	Certify that th	ne information supplied wit	n this filio	a does not qualify for	or the ex	emptions contain	ed in Chapter 119 F	lorida Statutes	I further ce	ertify that the in	nformation
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.											