

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009064

FILED
Apr 29, 2008
Secretary of State

Entity Name: SUNNY ISLES BEACH K-8 COMMUNITY SCHOOL FUND, INC

Current Principal Place of Business:

231 174TH STREET
SUITE 1618
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

231 174TH STREET
SUITE 1618
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 16-1773456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WELSH, ROBERT
231 174TH STREET #1618
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

WELSH, ROBERT
231 174TH STREET
#1618
SUNNY ISLES BEACH, FL 33160 US

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: _____

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WELSH, ROBERT
Address: 231 174TH STREET, SUITE 1618
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: S () Delete
Name: ABRAMSON, HERBERT W
Address: 310 POINCIANA ISLAND DRIVE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D () Delete
Name: KOVAL, ELENA
Address: 270 174TH STREET
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VP (X) Delete
Name: LUCHSTRO, ANTHONY
Address: 231 174TH STREET #1804
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: LOCASTRO, ANTHONY
Address: 231 174TH ST #1804
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: ROBERT R. WELSH

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date