

Office Use Only



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COVER LETTER

Amendment Section

TO:

Division of Corporations SUBJECT: SUNRISE ON THE GREEN CONDOMINIUM ASSOCIATION, INC. Name of Corporation DOCUMENT NUMBER: N06000009632 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KEITH D. SKOREWICZ Name of Contact Person APPLETON REISS, PLLC Firm/Company 215 N. HOWARD AVENUE, STE. 200 Address TAMPA, FL 33606 City/State and Zip Code njaromin@appletonreiss.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nicole R. Jaromin, Paralegal to Keith D. Skorewicz Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address:

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: SUNRISE ON THE GREEN CONDOMINIUM ASSOCIATION, INC.	
2. The principal PEMBROKE PI	d office address: C/O REALMANAGE, 9050 PINES BOULEVARD, SUITE 480,	
	address (if different):	<u> </u>
4. Date of incorp	rporation/qualification: 09/12/2006 Document number: N06000009632	
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	EISINGER, DENNIS, C/O EISINGER, BROWN, LEWIS, FRANKEL &	
	& CHAIET, P.A., 4000 HOLLYWOOD BLVD., SUITE 265-S	
	HOLLYWOOD, FL 33021	
6. The name and (if changed):	and street address of the new registered agent (if changed) and /or registered office APPLETON REISS, PLLC	7
	· ·	
	215 N. HOWARD AVENUE, STE. 200 P.O. Box NOT acceptable	, -
	TAMPA, FL 33606	******
The street address changed will	ress of its registered office and the street address of the business office of its registered agent Il be identical.	. Ø
	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
•	nure of an officer or director Printed or typed name and title	
I hereby accept I furthér agree of my duties, an document is bei corporation hu	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if the eing filed merely to reflect a change in the registered office address, I hereby confirm that the second is been notified in writing of this change.	e s e
. 11.t	gnature of Registered Agent Date	
Sig	gnature of Registered Agent Date	
If signing on be	ehalf of an entity:	
KEITH D. SKOI	DREWICZ	
Т	Typed or Printed Name	

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)