## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10000010237

FILED Apr 28, 2011 Secretary of State

Entity Name: SUNRISE VILLAS CONDOMINIUM NO. 10 ASSOCIATION, INC.

FEI Number Applied For ( )

US

**Current Principal Place of Business:** 

New Principal Place of Business:

C/O ON CALL MANAGEMENT, LLC 3900 W. COMMERCIAL BLVD, STE 227 FORT LAUDERDALE, FL 33309 % ON CALL MANAGEMENT, LLC 4699 N. STATE RD 7, STE K

TAMARAC, FL 33319

**Current Mailing Address:** 

**New Mailing Address:** 

C/O ON CALL MANAGEMENT, LLC P.O. BOX 590704 FORT LAUDERDALE, FL 33359 % ON CALL MANAGEMENT, LLC P.O. BOX 590704 FORT LAUDERDALE, FL 33359

FEI Number: 27-3880983

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

EGNER, THEODORE K P.A. 3067 EAST COMMERCIAL BLVD FORT LAUDERDALE, FL 33308 ON CALL MANAGEMENT, LLC 4699 N. STATE RD 7 STE K

TAMARAC, FL 33319 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: NARESH BACHAN

04/28/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: F

 Name:
 RAMSAROOP, KEITH

 Address:
 4699 N. STATE RD 7, STE K

 City-St-Zip:
 TAMARAC, FL 33319

Title:

 Name:
 CALLISTE, GREGORY

 Address:
 4699 N. STATE RD 7, STE K

 City-St-Zip:
 TAMARAC, FL 33319

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: KEITH RAMSAROOP

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04/28/2011