FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N17108

SUNNY GARDENS ESTATES HOMEOWNERS' ASSOCIATION, I

FILED May 14 1998 8:00am Secretary of State

NC.											
Principal Place of Business				Mailing Address					- 1 (65)(104 05); (101) (003); (101) 0010) 17() 010)) 010),		
18495 S. DIXIE HWY #266 MIAMI FL 33157 US			#266	18495 S. DIXIE HWY W. #268 Miami Fl 33157 US					3. Date Incorporated or Qualified 10/03/1986 4. FEI Number Applied For 65-0026632 Not Applicable		
Principal Place of Business 1				28. Mailing Address 26					5. Certificate of Status Desired \$8.75 Additional Fee Regulred		
Suite, Apt. #, etc.				Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be		
22 City & State				City & State					Trust Fund Contribution LJ Added to Fees 7. Is this nonprofit corporation a homeowners association?		
23				28				<u> </u>	Yes No		
Zip	· — —						ountry (8. This corporation owes or has paid the current year Intangible		
24	25 9. Name and Address of Current		29 nt Registe	<u> </u>					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
, 81 Name								An	mette Gurman		
18495 S. DIXIE HWY #266							Street	Street Address (P.O. Box Number is Not Acceptable)			
MAMI FL		, 200						MI	iami II		
						84	City	<u> </u>	es Zin Code		
11. Pureuant t	to the provisio	ne of Septions 617 050	12 and 61	7 1508 Florida Statu	itas tha	abov.	a-named	corpo			
office or re agent. I as	egisterod age m familiar viri	nt, or both, in the State in and accept the oblig	OF Flatid	a. Sych change was Section 617.0503, F	authoriz lorida St	ed by atutes	the cor	poratio	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered		
SIGNATURE A	Signature, typed o	printed name of registered by	<i></i>	LA (NO	TE: Registe	red Ace	ont signature	reiguires	d whon reinstating) DATE		
12.		OFFICERS AN		DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	VPD			DELETE					Change Addition		
NAME	RAVELO, ELOY			1.2							
STREET ADDRESS	1 1010						ADDRESS	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
CITY-ST-ZIP TITLE	MIAMI FL			DELETE	_	CITY-S TITLE	ST-ZIP	14	Change Addition		
NAME	GONZALE	Z, EMELINA		A vection		NAME			WHETTE GUZMAN_		
STREET ADDRESS	1						1 7 7		1237 SW 153 Terr.		
CITY-ST-ZIP	MIAMI FL 33157-1172						ST-ZIP	W	CIAML Fl. 33157		
TITLE	SD			DELETE 3.1			1 TITLE S		Change Addition		
NAME	RAVELO,			•	3.2	NAME		C	ARMEN RALAT		
STREET ADDRESS		/ 112 PLACE			- 1		ADDRESS	I	5436 SW 112 PLACE		
CITY-ST-ZIP	MIAMI FL			DELETE			ST - ZIP	 `	NINE FI. 33157 Change Addition		
TITLE NAME	DOWNS !	CROMWELL		M DECEIG		title Name		- 6	N/A Grange G Adortion		
STREET ADDRESS		/ 155TH LN.					ADDRESS	}	j		
CITY+ST-ZIP		33157-1165			- 1	CITY-S		İ			
TITLE	D	001071100		DELETE	_	TITLE		D	Change Addition		
NAME	ROJAS, G	LORIA PATRICI			5.2	NAME		_			
STREET ADDRESS 11273 SW 155 LANE				5.3 STREET AD			ADDRESS	[
CITY-ST-ZIP	TY-ST-ZIP MIAMI FL						3T - ZIP				
TITLE	D			DELETE	6.1	TITLE		Ja	aime Cituentes Achange Addition 5412 SW 112 PL jami H 33157		
HAME	RALAT, A				6.2	NAME		1 2	5412 SW 112 PL		
STREET ADDRESS		112 PLACE			6.3	STREET	ADDRESS	[, ,	1 32 100		
CITY-ST-ZIP MIAMI FL				6.4 CITY - ST - ZIF				<u>M</u>	Jany 41 33157		
hdicated	c n this annua	intormation supplied v I report or supplement	vith this fil al annual	ing does not qualify report is true and ac	tor the excurate a	xemp	ition state at my sig	ed in S Inature	Section 119.07(3)(i), Florida Statutes, I further certify that the information e shall have the same legal effect as if made under oath; that I am an		

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a 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 12 or Block 13 if changed, or on an attackment with an address.

GNATURE:

(Comparison 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 the corporation or on an attackment with an address.

(Comparison 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 the corporation of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in the corporation of th

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