


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N22038</b> 1. Entity Name <b>SUNSET PALMETTO PARK, PHASE II, CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business 7460 SW 130TH STREET MIAMI, FL 33156			Mailing Address 7460 SW 130TH STREET MIAMI, FL 33156		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>65-1114717</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>PARKS, LARRY D ESQ.</b> <b>7460 SW 130TH STREET</b> <b>MIAMI, FL 33156</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>		10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
DP SIMMONS, SYLVIA 6820 NW 77TH COURT MIAMI, FL 33166	<input type="checkbox"/> Delete				
DVP SIMMONS, MICHAEL 6820 NW 77 CT MIAMI, FL 33166	<input type="checkbox"/> Delete				
DS BARRIOS, ENRIQUE 6820 NW 77 COURT MIAMI, FL 33166	<input type="checkbox"/> Delete				
DT DIAZ-SULVIERA, ALBERTO C 6820 NW 77 CT MIAMI, FL 33166	<input type="checkbox"/> Delete				
D CALAFELL, BENNY 6820 NW 77 CT MIAMI, FL 33166	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
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.					
<b>SIGNATURE:</b> _____ <i>Sylvia Simmons</i> <b>4-28-08</b> <b>305-594-7521</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					