

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 21, 1996 08:00 AM
Secretary of State

DOCUMENT # N29502 (4)
1. Corporation Name
SUNRISE COMMUNITY, INC.



Principal Place of Business Mailing Address
C/O LESLIE W. LEECH, JR.
9040 SUNSET DR. S-70-A
MIAMI FL 33173
US

3. Date Incorporated or Qualified **11/30/1988** 3a. Date of Last Report **02/27/1995**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	65-0118730	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
23	28		
Zip	Country	Zip	Country
24	25	29	30
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

LEECH, LESLIE W., JR.
9040 SUNSET DR
S-70-A
MIAMI FL 33173

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when transitioning) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPELIOS, GEORGE L.	1.2 NAME	
STREET ADDRESS	10729 SW 117 CT	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICE, STEPHEN T.	2.2 NAME	
STREET ADDRESS	11500 SW 92 COURT	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TUCKER, GERRY	3.2 NAME	
STREET ADDRESS	8100 SW 133 COURT	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	3.4 CITY - ST - ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBIN, RICHARD L.	4.2 NAME	
STREET ADDRESS	7741 SW 62 AVENUE #202	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	4.4 CITY - ST - ZIP	
TITLE	P <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEECH, LESLIE W., JR.	5.2 NAME	
STREET ADDRESS	9040 SUNSET DR S-70-A	5.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	5.4 CITY - ST - ZIP	
TITLE	ST <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEEKS, JAMES G.	6.2 NAME	
STREET ADDRESS	9040 SUNSET DR, S-70-A	6.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information 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 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96 305-596-9040
Date Daytime Phone #

CR2E037 (12/95)

Sunrise Board of Directors	
NAME	ADDRESS
Spelios, George L., DDS Chairperson	10729 SW 117 CT Miami FL 33186
Rice, Stephen T., CLU ChFC 1st Vice Chp.	Rosenthal & Rice 255 AlhambraCirST325 Coral Gables FL33134
Weinger, Steven M., Esq 2nd Vice Chp.	Kurzban Kurzban & Weinger PA 2650 SW 27 Avenue Miami FL 33133
Tucker, Geraldine	8100 SW 133 Court Miami FL 33183
Adside, Dorothy W.	PO Box 561042 Miami FL 33156
Greenberg, Barnett A. DBA	7761 SW 176 Street Miami FL 33157
Greenstein, Howard B. MBA	MetroDade Off VicSer Suite 2210 111 NW First ST Miami FL 33128
McCarthy, Richard H.	5041 SW 94 Court Miami FL 33165
Moring, Robert H. CLU, CFP	Suite 409 9400 S Dadeland BLVD Miami FL 33156
Rubin, Richard L., MD	8525 SW 92 ST SuB8 Miami FL 33156
Smith, Richard	Fontana Apts #6 7540 SW 59th CT Miami FL 33143
Wetherington, Gloria A	3320 NE 18 TERR Oakland Pk FL 33306- 1008
Young, Pauline A., EdD	12805 SW 103 CT Miami FL 33176