## 2/18/94 B 2293 C FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

POCUMENT #

LEECH, LESUE W JR

9040 SUNSET DRIVE

SUITE 70A MIAMI FL 33173



## FILED Feb 18 1998 8:00am Secretary of State

	SUNHISE COMMUNITY PR	IUMUTIUNS, INC.					
P	rincipal Place of Business	Mailing Address		I ABSTALOS SUB ABLIA DALES ABLIA OBINI OBINI OBINI DOSAL WIZIN DISAL HIDIR BONI INDI			
	MO SUNSET DRIVE AMI FL 33173	9040 SUNSET DRIVE MIAMI FL 33173		3. Date Incorporated or Qualified 03/01/1996			
)				4. FEI Number	Applied For		
İ				65-0662341	Not Applicable		
21	Principal Place of Business	2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
22	Suite, Apt. #, etc.	Suile, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
23	City & State	Cily & State		7. Is this nonprofit corporation a homeowners association?			
24	Zip Country	2ip 30	Country	8. This corporation owes or has paid the curri Personal Property Tax due June 30.	rent year Intangible Yes No		
		of Current Registered Agent		10. Name and Address of New Registered	Agent		
			81 Name				

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.

83

84 City

Street Address (P.O. Box Number is Not Acceptable)

agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE Signature, typed or protect out-out reputated agent and the displacation (NOTE Registered Agent aignature required when reinstating)  DATE											
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OF		S IN 12					
TITLE	D	DELETE	1.1 TITLE	S/T	Change	X Addition					
NAME	GREENBERG, BARNETT		1.2 NAME	HART, MICHAEL J.							
STREET ADDRESS	7761 SW 176TH ST		1.3 STREET ADDRESS	9040 SUNSET DRIVE							
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST- ZIP	MIAMI_FL33173							
TITLE	D	☐ DELETE	21 TITLE		☐ Change	Addition					
NAME	TUCKER, GERALDINE		2.2 NAME								
STREET ADORESS	8100 SW 133RD CT		2.3 STREET ADDRESS								
CITY-ST-ZIP_	MIAMI FL 33183		2 4 CITY-ST-ZIP								
TITLE	D	DELETE	3.1 TOLE	(	☐ Change	Addition					
NAME	MCCARTHY, RICHARD H		3.2 NAME								
STREET ADDRESS	5041 SW 94TH CT		3.3 STREET ADDRESS	Ì							
CITY-ST-ZIP	MIAMI FL 33165		3.4. CITY-ST-ZIP								
TITLE	P	DETEA	4.1 TITLE		Change	Addition					
NAME	LEECH, LES JR		4 2 NAME								
STREET ADDRESS	9040 SUNSET DRIVE		4.3 STREET ADDRESS	l							
CITY-ST-ZIP	MIAMI FL		4.4 CITY - ST- ZIP			- Carallel					
TITLE	\$	DELETE	5 1 TITLE	1	☐ Change	Addition					
NAME	WEEKS, JAMES G.		5.2 NAME	(							
STREET ADDRESS	9040 SUNSET DRIVE		5.3 STREET ADDRESS								
CITY-ST-ZIP	MIAMI FL	···	54 CITY-ST-ZIP	<del></del>							
TITLE		DEFETE	6.1 TITLE	(	[] Change	Addition					
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS	Ì							
CITY-ST-ZIP			6.4 CITY - ST - ZIP	<u> </u>							

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplicmental 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 attachmore with an address.

SIGNATURE:

WORK THE TYPE OF PROSED MANE OF SIGNING DEACER OR DIRECTOR

1/27/98

(305) 596-9040

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Zip Code

Daytime Phone # 0033066