2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008
Secretary of State

DOCUMENT# N96000002140

Entity Name: SUNRISE COMMUNITY SERVICES, INC.

Current Principal Place of Business:

9040 SUNSET DRIVE
SUITE A
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

C/O LESLIE W. LEECH, JR
9040 SUNSET DR
MIAMI, FL 33173

New Mailing Address:

FEI Number: 65-0662366 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEECH, LESLIE W JR.
9040 SUNSET DRIVE
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WEINGER, STEVEN M
Address: 2650 SW 27 AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete
Name: GREENBERG, BARNETT A
Address: 7761 SW 176 STREET
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: WYCOFF, MARILYN
Address: 4208 SW 138 PLACE
City-St-Zip: MIAMI, FL 33175

Title: P ( ) Delete
Name: LEECH, LES LIE W JR
Address: 9040 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: ST ( ) Delete
Name: WEEKS, JAMES G
Address: 9040 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LESLIE W. LEECH, JR PRES 02/04/2008

Electronic Signature of Signing Officer or Director Date