

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001358

1. Entity Name

SUNRISE HARBOUR HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% LAW OFFICES OF HOLLAND & KNIGHT LLP  
701 BRICKELL AVENUE, SUITE 3000  
MIAMI FL 33131

% LAW OFFICES OF HOLLAND & KNIGHT LLP  
701 BRICKELL AVE., SUITE 3000  
MIAMI FL 33131

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0827410

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION  
% LAW OFFICES OF HOLLAND & KNIGHT LLP  
701 BRICKELL AVE., SUITE 3000  
MIAMI FL 33131

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME PASALODES, OMAR  
STREET ADDRESS 100 E. SUNRISE AVE  
CITY-ST-ZIP CORAL GABLES FL 33133-7023

TITLE ☐ Change ☒ Addition  
NAME Leonard Steiner, M.D.  
STREET ADDRESS 6934 Sunrise Ct.  
CITY-ST-ZIP CORAL Gables, FL 33133-7023

TITLE D ☒ Delete  
NAME WILSON, PATRICIA  
STREET ADDRESS 6944 SUNRISE TERRACE  
CITY-ST-ZIP CORAL GABLES FL 33133-7023

TITLE ☐ Change ☒ Addition  
NAME Dario Restrepo  
STREET ADDRESS 6902 Sunrise Drive  
CITY-ST-ZIP CORAL Gables, FL 33133-7023

TITLE D ☐ Delete  
NAME DAVIS, AIMEE  
STREET ADDRESS 6865 SUNRISE TERRACE  
CITY-ST-ZIP CORAL GABLES FL 33133-7023

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME SILVER, WILLIAM  
STREET ADDRESS 6949 SUNRISE DRIVE  
CITY-ST-ZIP CORAL GABLES FL 33133-7023

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME WEINSTEIN, ANDREW H  
STREET ADDRESS 6939 SUNRISE DRIVE  
CITY-ST-ZIP CORAL GABLES FL 33133-7023

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME SUGARBAKER, CATHY  
STREET ADDRESS 6916 SUNRISE TERRACE  
CITY-ST-ZIP CORAL GABLES FL 33133-7023

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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.

SIGNATURE:

ANDREW H WEINSTEIN 3/4/02 305 789-7755



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)