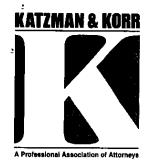
FILED 2002 UNIFORM BUSINESS REPORT (UBR) Sep 22, 2002 8:00 am Secretary of State DOCUMENT # N9800005078 09-22-2002 90068 016 ****61.25 GRAND KEY AT SUNSET LAKES COMMUNITY ASSOCIATION. 05-14-2002 90040 047 ****61.25 Principal Place of Business Mailing Address 8190 STATE ROAD 84 14275 SW 142 AVENUE DAVIE FL 33324 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, Sc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0919981 uncise WMMSR Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ritessional Box Number is Not Acceptable) PATRICIA KIMBALL FLETCHER, P.A. Financial 200 S. BISCAYNE BLVD. **SUITE 3410** MIAMI FL 33131 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 ed agent and title if applicable After September 13, 2002. 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. min. will be \$236.25. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PD Delete TITLE Hr. Howard Harbury 197965W 27 Court **T** Change ☐ Addition EISENMAN, TOREY NAME 8190 STATE ROAD 84 STREET ADDRESS Hiramar Fl. 33029 DAVIE FL 33324 CITY-ST-ZIP ۷D Delete TITLE Change ☐ Addition

NAME STREET ADDRESS CITY-ST-ZIP Joe Savino OSTERMAN, PETER NAME 1486 3m 38 Court STREET ADDRESS 8190 STATE ROAD 84 . STREET ADDRESS Haramar Fl. 33029 CITY-ST-ZIP **DAVIE FL 33324** CITY-ST-ZIE STD **™** Delete Debbre Caronero TITLE ☐ Addition NAME MCPHERSON, GREG 2602 SW 187" Terr. NAME STREET ADDRESS 8190 STATE ROAD 84 STREET ADDRESS Luramar, FL 33029 CITY-\$T-ZIP DAVIE FL 33324 CITY-ST-7IP תד TITLE ☐ Delete TITLE ☐ Change Addition Tony Winter NAME NAME 19953 SW 26 Street STREET ADDRESS STREET ADDRESS Hrancer FL. 33029 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Change Danet Dominguez NAME NAME 18734 SW 28 Court STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Mramar FL 33029 TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 actoress, with all other like empowered.

SIGNATURE:

9/4/



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873085

LEIGH C. KATZMAN FERREN L. KORR

RACHEL E. FRYDMAN
DAVID A. KUPPERMAN
MARK M. HEINISH
ERIC M. APPEL
MICHAEL E. CHAPNICK
GUSTAVO G. ALARCON

September 19, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Uniform Business Report

Dear Sir/Madam:

Enclosed please the fully executed Uniform Business Report as well as the applicable filing fees. Should you have any questions or comments with respect to the contents of this letter or the enclosure, please feel free to contact me.

Sincerely,

KATZMAN & KORR, P.A.

Ferren L. Korr, Esq. Managing Partner

FLK:edw Enclosure

cc:

Board of Directors

Property Manager