2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005589

FILED Mar 16, 2009 Secretary of State

Entity Name: SUNSET LAKES ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 300 ARAGON AVE #210 MIAMI, FL 33134 **Current Mailing Address: New Mailing Address:** 300 ARAGON AVE #210 STE 210 MIAMI, FL 33134 FEI Number: 65-1040248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SANCHEZ, JUAN A ESQ 10251 SUNSET DRIVE #A106 MIAMI, FL 33173 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BECEIRO, MAYDELIN Name: Name: Address: 15898 SW 65 STE Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: Title: () Delete Title: (X) Change () Addition FERNANDEZ, ROSEMARY Name: Name: FERNANDEZ, ROSEMARY Address: 6474 SW 158 PASS Address: 6474 SW 158 PASS City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33193 Title: () Delete Title: (X) Change () Addition CARRIL, LESLIE CARRIL, LESLIE Name: Name: 6455 SW 158 PASS 6455 SW 158 PASS Address: Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33193 Title: VΡ () Delete Title: (X) Change () Addition Name: MUNOZ, MARGARITA Name: VELAZQUEZ, DIANE 15833 SW 65 STE 6438 SW 158 PASS Address: Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33193 Title: () Delete Title: () Change () Addition MACGOWAN, MARK Name: Name: 15865 SW 65 STE Address: Address: City-St-Zip: MIAMI, FL 33193 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: MAYDELIN BECEIRO P 03/16/2009