

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000052177

Entity Name: EQUITY ONE (SUNLAKE) INC.

FILED
Feb 05, 2006
Secretary of State

Current Principal Place of Business:

1696 N.E. MIAMI GARDENS DRIVE
N. MIAMI BEACH, FL 33179 US

New Principal Place of Business:

1600 NE MIAMI GARDENS DRIVE
N. MIAMI BEACH, FL 33179 US

Current Mailing Address:

1696 N.E. MIAMI GARDENS DRIVE
N. MIAMI BEACH, FL 33179 US

New Mailing Address:

1600 NE MIAMI GARDENS DRIVE
N. MIAMI BEACH, FL 33179 US

FEI Number: 20-1931202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KATZMAN, CHAIM
Address: 1696 N. E. MIAMI GARDENS DRIVE
City-St-Zip: N. MIAMI BEACH, FL 33179 US

Title: VPD () Delete
Name: VALERO, DORON
Address: 1696 N. E. MIAMI GARDENS DRIVE
City-St-Zip: N. MIAMI BEACH, FL 33179 US

Title: VPT () Delete
Name: SIPZNER, HOWARD M
Address: 1696 N.E. MIAMI GARDENS DRIVE
City-St-Zip: N. MIAMI BEACH, FL 33179 US

Title: VPS () Delete
Name: GALLAGHER, ARTHUR L
Address: 1696 NE MIAMI GARDENS DRIVE
City-St-Zip: N. MIAMI BEACH, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KATZMAN, CHAIM
Address: 1600 NE MIAMI GARDENS DRIVE
City-St-Zip: N. MIAMI BEACH, FL 33179 US

Title: VPD (X) Change () Addition
Name: VALERO, DORON
Address: 1600 NE MIAMI GARDENS DRIVE
City-St-Zip: N. MIAMI BEACH, FL 33179 US

Title: VPT (X) Change () Addition
Name: SIPZNER, HOWARD M
Address: 1600 NE MIAMI GARDENS DRIVE
City-St-Zip: N. MIAMI BEACH, FL 33179 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTHUR L. GALLAGHER

VPS

02/05/2006

Electronic Signature of Signing Officer or Director

Date