

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000064696

FILED
Mar 03, 2004
Secretary of State

Entity Name: THP SUNSET BAY CORPORATION

Current Principal Place of Business:

ONE OAKWOOD BLVD., STE 195
HOLLYWOOD, FL 33021

New Principal Place of Business:

6535 NOVA DRIVE, SUITE 106
DAVIE, FL 33317

Current Mailing Address:

ONE OAKWOOD BLVD., STE 195
HOLLYWOOD, FL 33021

New Mailing Address:

6535 NOVA DRIVE, SUITE 106
DAVIE, FL 33317

FEI Number: 65-0945615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIAD HOUSING PARTNERS, LLC
ONE OAKWOOD BLVD., STE 195
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

TRIAD HOUSING PARTNERS, LLC
6535 NOVA DRIVE, SUITE 106
DAVIE, FL 33317 US

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:

03/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REICH, DAVID
Address: ONE OAKWOOD BLVD., STE 195
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: SCHULTZ, DAVID
Address: ONE OAKWOOD BLVD., STE 195
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: PFEFFER, OLIVER
Address: ONE OAKWOOD BLVD., STE 195
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: REICH, DAVID
Address: 6535 NOVA DRIVE, SUITE 106
City-St-Zip: DAVIE, FL 33317

Title: D (X) Change () Addition
Name: SCHULTZ, DAVID
Address: 6535 NOVA DRIVE, SUITE 106
City-St-Zip: DAVIE, FL 33317

Title: D (X) Change () Addition
Name: PFEFFER, OLIVER
Address: 6535 NOVA DRIVE, SUITE 106
City-St-Zip: DAVIE, FL 33317

I hereby certify that the information supplied with this filing does not qualify for the 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 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: OLIVER PFEFFER

D

03/03/2004

Electronic Signature of Signing Officer or Director

Date