2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009233

Entity Name: SUNSET T.R.P. INC.

Current Principal Place of Business:

6105 SW 125TH AVENUE MIAMI. FL 33183

Current Mailing Address:

6105 SW 125TH AVENUE MIAMI, FL 33183 US

FEI Number: 27-3697303 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAUER, ERIN E DR. 6105 SW 125TH AVENUE MIAMI, FL 33183 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: ERIN BAUER 01/20/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

EXECUTIVE DIRECTOR Title Title IMMEDIATE PAST CHAIR

BAUER, ERIN E DR. PICARD, HELEN Name Name

15101 SW 69 COURT 7962 SW 86TH TERRACE Address Address

City-State-Zip: MIAMI FL 33143 MIAMI FL 33158 City-State-Zip:

SECRETARY Title Title **TREASURER**

Name ZELONKER, REGINA Name REGISTER, DEBBIE

Address 10040 SW 144TH STREET Address 1240 PLACETAS AVENUE

MIAMI FL 33176 City-State-Zip: CORAL GABLES FL 33146 City-State-Zip:

Title **OFFICER** Title OFFICER, CHAIR, CHAIRMAN

Name SEIPP, JO-AN FRECHETTE, SHAWN Name

Address 3709 ALHAMBRA COURT 2000 NORTH BAYSHORE Address

APT. 114

City-State-Zip: MIAMI FL 33137

OFFICER Title Name

JACOBS, CYNTHIA Name ALTMAN, AMANDA

1040 WEST 47TH STREET Address Address 18071 BISCAYNE BLVD

City-State-Zip: MIAMI BEACH FL 33140 PH₂

City-State-Zip:

Title

CORAL GABLES FL 33134

OFFICER, VC

AVENTURA FL 33160 City-State-Zip: Continues on page 2

I hereby 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 all other like empowered.

01/20/2020 SIGNATURE: ERIN BAUER EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 20, 2020

Secretary of State

2304921728CC

Date

Officer/Director Detail Continued:

Address

Title **OFFICER** Title **OFFICER**

Name GONZALEZ, ANDRES Name MARCH, MARILYN

5424 NW 112TH PLACE Address 5935 SW 82ND AVENUE Address

City-State-Zip: MIAMI FL 33134 City-State-Zip: DORAL FL 33178

Title **OFFICER** Title **OFFICER**

KLEIN, MIKE Name SHERIDAN, CRISPIN Name

> Address 2000 NORTH BAYSHORE 400 SOUTH POINTE DRIVE 2205 114

City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI BEACH FL 33139