2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2019
Secretary of State
1093706042CC

DOCUMENT# N31505

Entity Name: SUNSET SPRINGS MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

1840 S.E. 4TH AVENUE
SUITE 2B
FORT LAUDERDALE, FL 33316

Current Mailing Address:

C/O AVALON MANAGEMENT SERVICES
P. O. BOX 267908
WESTON, FL 33326 US

FEI Number: 65-0107022

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
2149 NORTH COMMERCE PARKWAY
WESTON, FL 33326 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	JARAMILLO, NICOLAS
Address	PO BOX 267908
City-State-Zip:	WESTON FL 33326

Title	SECRETARY
Name	RICHTER, LYLE
Address	PO BOX 267908
City-State-Zip:	WESTON FL 33326

Title	VP
Name	KALAROVICH, PHILLIP
Address	PO BOX 267908
City-State-Zip:	WESTON FL 33326

Title	DIRECTOR
Name	JACOBS, BARRY
Address	C/O AVALON MANAGEMENT SERVICES P. O. BOX 267908
City-State-Zip:	WESTON FL 33326

Title	T
Name	SERPE, GAETANO
Address	PO BOX 267908
City-State-Zip:	WESTON FL 33326

Title	PRESIDENT
Name	CARRAWAY, GARY
Address	PO BOX 267908
City-State-Zip:	WESTON FL 33326

Title	DIRECTOR
Name	MARGOLIES, MELANIE
Address	PO BOX 267908
City-State-Zip:	WESTON FL 33326

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.

SIGNATURE: GARY CARRAWAY PRESIDENT 01/18/2019

Electronic Signature of Signing Officer/Director Detail — Date