

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 14 1998 8:00am
Secretary of State



NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 714781 (2)
 1. Corporation Name
SABAL SHORES APARTMENT ASSOCIATION, INC.



Principal Place of Business 600 SOUTH OCEAN BLVD BOCA RATON FL 33432		Mailing Address 600 SOUTH OCEAN BLVD BOCA RATON FL 33432		3. Date Incorporated or Qualified 06/17/1968	
				4. FEI Number 59-1311339	
				Applied For <input type="checkbox"/> Not Applicable	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BECKER, POLIAKOFF & STREITFELD, PA MOLLENGARDEN, PETER C., ESQ. 500 AUSTRALIAN AVE SOUTH 9TH FLOOR WEST PALM BEACH FL 33401				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	READ, WILLIAM 600 SOUTH OCEAN BLVD BOCA RATON, FL 00000	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE DS	ALCALA-SUCRE, FRANCES 600 SOUTH OCEAN BLVD. BOCA RATON FL <i>moved</i>	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE T	MADDEN, JOHN 600 S OCEAN BLVD BOCA RATON FL	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE Secretary	Harvey A. Ornstein 600 S. Ocean Blvd. Boca Raton, FL 33432	4.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Secretary/Director Harvey A. Ornstein 600 S. Ocean Blvd. Boca Raton, FL 33432
TITLE <input type="checkbox"/> DELETE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> DELETE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Harvey A. Ornstein* **4/6/98** **561 395-8332**

CR2E037 (10/97)