## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 28, 2002 8:00 am Secretary of State DOCUMENT # 714781 1. Entity Name 03-28-2002 90362 004 \*\*\*\*61.25 SABAL SHORES APARTMENT ASSOCIATION, INC. Principal Place of Business Mailing Address 600 SOUTH OCEAN BLVD 600 SOUTH OCEAN BLVD **BOCA RATON FL 33432 BOCA RATON FL 33432** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1311339 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) BECKER, POLIAKOFF & STREITFELD, PA MOLLENGARDEN, PETER C., ESQ. 500 AUSTRALIAN AVE SOUTH 9TH FLOOR City Zip Code WEST PALM BEACH FL 33401 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. OFFICERS AND DIRECTORS 10. (9/01) Ď TITLE Change Addition TITLE ☐ Delete Assistant Treasurer NAME NAME READ, WILLIAM Charles Lesser STREET ADDRESS STREET ADDRESS 600 SOUTH OCEAN BLVD 600 South Ocean Blvd. CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** Boca Raton, FL. 33432 DS ☐ Delete TITLE Director Change Addition TITLE Norman Walt NAME NAME ornstein, harvey a. STREET ADDRESS 600 South Ocean Blvd. STREET ADDRESS 600 S. OCEAN BLVD CITY-ST-ZIP CITY-ST-71P Boca Raton, FL 33432 **BOCA RATON FL 33432** ☐ Addition ☐ Change - Delete TITLE MADDEN, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 600 S OCEAN BLVD CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL** ☐ Addition Change VP ☐ Delete TITLE TITLE NAME SWIFT, JOHN F NAME STREET ADDRESS STREET ADDRESS 600 S. OCEAN BLVD CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ☐ Addition VP ☐ Delete TITLE Change NAME SHELBY, STANLEY J NAME STREET ADDRESS STREET ADDRESS 600 S. OCEAN BLVD CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33432 TITLE Delete TITLE ☐ Change ☐ Addition NAME EISENBERG, MILLICENT NAME STREET ADDRESS STREET ADDRESS 600 S. OCEAN BLVD

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

John E. Madden, Jr. President & Treasurer

SIGNATURE:

03/12/02 (561)395-8332

CITY-ST-ZIP

**BOCA RATON FL 33432** 

CITY-ST-ZIP

(561)395-8332

**FILED**