

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 28 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONSDOCUMENT # 732174 (8)  
1. Corporation Name  
SABAL CHASE CONDOMINIUM ASSOCIATION (I), INC.

Principal Place of Business

Mailing Address

10999 SW 113TH PLACE  
MIAMI FL 3317610999 SW 113TH PLACE  
MIAMI FL 33176-31773. Date Incorporated or Qualified  
03/06/19753a. Date of Last Report  
02/21/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

59-1672016

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

## 9. Name and Address of Current Registered Agent

## 10. Name and Address of New Registered Agent

SKRLD INC.  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES FL 33134

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

## 12. OFFICERS AND DIRECTORS

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD ☐ DELETE  
NAME KAPLAN, PHYLLIS  
STREET ADDRESS 11487-D SW 109TH ROAD  
CITY-ST-ZIP MIAMI, FL.,1.1 TITLE SD ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE SD ☒ DELETE  
NAME MEADER, PATTY  
STREET ADDRESS 11387-A SW 109TH ROAD  
CITY-ST-ZIP MIAMI FL2.1 TITLE PD ☐ Change ☒ Addition  
2.2 NAME ALLEN, PHYLLIS  
2.3 STREET ADDRESS 11605 SW 108 TERR  
2.4 CITY-ST-ZIP MIAMI, FL 33176TITLE TD ☐ DELETE  
NAME HERSMAN, JEAN  
STREET ADDRESS 10909-A SW 113TH PLACE  
CITY-ST-ZIP MIAMI FL3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE D ☒ DELETE  
NAME LEDUC-WEST, JANINE  
STREET ADDRESS 10953-G S.W. 113TH PLACE  
CITY-ST-ZIP MIAMI FL4.1 TITLE VPD ☒ Change ☒ Addition  
4.2 NAME DUTTON, TONY  
4.3 STREET ADDRESS 11491-B SW 109 ROAD  
4.4 CITY-ST-ZIP MIAMI, FL 33176TITLE D ☒ DELETE  
NAME FOX-PEREZ, LYN  
STREET ADDRESS 11499-A SW 109TH ROAD  
CITY-ST-ZIP MIAMI FL5.1 TITLE D ☒ Change ☒ Addition  
5.2 NAME DESENA, FRED  
5.3 STREET ADDRESS 10905-A SW 113 PLACE  
5.4 CITY-ST-ZIP MIAMI, FL 33176TITLE D ☒ DELETE  
NAME HOPSON, ROBERT  
STREET ADDRESS 10917-G SW 113TH PLACE  
CITY-ST-ZIP MIAMI FL6.1 TITLE D ☒ Change ☒ Addition  
6.2 NAME KAVANAUGH, MICHELLE  
6.3 STREET ADDRESS 11490-E SW 109 ROAD  
6.4 CITY-ST-ZIP MIAMI, FL 33176

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0033065

CR2E037 (9/96)