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Apr 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 741982 (3)
1. Corporation Name
ISLE OF SANDALFOOT CONDOMINIUM, INC. 2



Principal Place of Business 9273 SW 8TH ST BOCA RATON FL 33428	Mailing Address 9273 SW 8TH ST BOCA RATON FL 33428-6806
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3. Date Incorporated or Qualified 03/13/1978	3a. Date of Last Report 04/10/1996
4. FEI Number 59-1977322	Applied For <input type="checkbox"/> Not Applicable
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

9. Name and Address of Current Registered Agent
**MARGARET LASALLE
9273 S.W. 8TH ST. #304
BOCA RATON FL 33428**

10. Name and Address of New Registered Agent

81 Name Mickey Robinson
82 Street Address (P.O. Box Number is Not Acceptable) 9273 S. W. 8th St. #217
83
84 City Boca Raton
85 Zip Code FL 33428

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 Mickey Robinson (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	LASALLE, MARGARET	
STREET ADDRESS	9273 SW 8TH ST	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	CHARLES KIRKILES	
STREET ADDRESS	9723 S.W. 8TH ST. #105	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CHARLES LOWE	
STREET ADDRESS	9723 SW 8TH ST. #421	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	LOMBARDO, AL	
STREET ADDRESS	9273 S W 8TH ST	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STEIN, DAVID	
STREET ADDRESS	55 SKYMARK DR #606	
CITY-ST-ZIP	WILLOWDALE ON	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Mickey Robinson	
1.3 STREET ADDRESS	9273 S. W. 8th St. #217	
1.4 CITY-ST-ZIP	Boca Raton, FL 33428	
2.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	David Stein	
2.3 STREET ADDRESS	9273 S. W. 8th St. #404	
2.4 CITY-ST-ZIP	Boca Raton, FL 33428	
3.1 TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Eugene Calden	
3.3 STREET ADDRESS	9273 S. W. 8th St. #211	
3.4 CITY-ST-ZIP	Boca Raton, FL 33428	
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Charles Kirkiles	
4.3 STREET ADDRESS	9273 S. W. 8th St. #105	
4.4 CITY-ST-ZIP	Boca Raton, FL 33428	
5.1 TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Al Lombardo	
5.3 STREET ADDRESS	9273 S. W. 8th St. #207	
5.4 CITY-ST-ZIP	Boca Raton, FL 33428	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 Mickey Robinson

CR2E037 (9/96)