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FILED

Mar 11 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 750329 (5)

1. Corporation Name

ISLE OF SANDALFOOT CONDOMINIUM, INC. 5

Principal Place of Business

Mailing Address

9440 S.W. 8TH STREET
BOCA RATON FL 33428-68629440 S.W. 8TH STREET
BOCA RATON FL 33428-68283. Date Incorporated or Qualified
12/20/19793a. Date of Last Report
03/27/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

59-2003145

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

RIFKIN, ROBERT P.
9440 SW 8TH STREET
#405
BOCA RATON FL 33428

81 Name

Joseph Yesenko

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

9440 S. W. 8th St. #210

83

84 City

Boca Raton

FL

85 Zip Code

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

Joseph Yesenko PRES. JOSEPH YESENKO

(NOTE: Registered Agent signature required when reinstating)

DATE

2/3/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	RIFKIN, ROBERT P.	
STREET ADDRESS	9440 SW 8TH STREET #405	
CITY - ST - ZIP	BOCA RATON, FL 00000	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	BAYER, RICHARD	
STREET ADDRESS	9440 SW 8TH STREET #322	
CITY - ST - ZIP	BOCA RATON FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	GOLD, HATTIE	
STREET ADDRESS	9440 SW 8TH STREET #104	
CITY - ST - ZIP	BOCA RATON FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	ONEK, PAUL	
STREET ADDRESS	9440 SW 8TH STREET #407	
CITY - ST - ZIP	BOCA RATON, FL 00000	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	HENRY, CHARLES	
STREET ADDRESS	9440 SE 8TH STREET #310	
CITY - ST - ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Joseph Yesenko	
1.3 STREET ADDRESS	9440 S. W. 8th St. #210	
1.4 CITY - ST - ZIP	Boca Raton, FL 33428	
2.1 TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Daniel Albano	
2.3 STREET ADDRESS	9440 S. W. 8th St. #112	
2.4 CITY - ST - ZIP	Boca Raton, FL 33428	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Stanley Schrager	
3.3 STREET ADDRESS	9440 S. W. 8th St. #115	
3.4 CITY - ST - ZIP	Boca Raton, FL 33428	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
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: Joseph Yesenko PRES. JOSEPH YESENKO 2/3/97 (561) 483-2524

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)