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Mar 13 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 # **750618** (1)

1. Corporation Name

ISLE OF SANDALFOOT CONDOMINIUM INC. 6

Principal Place of Business

Mailing Address

**9370 SOUTHWEST 8TH STREET
BOCA RATON FL 33428**

**9370 SOUTHWEST 8TH STREET
BOCA RATON FL 33428-6824**



3. Date Incorporated or Qualified **01/15/1980** 3a. Date of Last Report **04/01/1996**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2074079		Applied For ☐ Not Applicable	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23 Zip		28 Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
24 Country		29 Country					

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MISERENDINO, LEO
9370 S. W. 8TH ST.
SUITE 102
BOCA RATON FL 33428**

81 Name	Victor Lisabeth
82 Street Address (P.O. Box Number is Not Acceptable)	9370 S. W. 8th St. #107
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

Victor Lisabeth

(NOTE: Registered Agent signature required when reinstating)

DATE

2-28-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P/D
NAME	MISERENDINO, LEO	1.2 NAME	Victor Lisabeth
STREET ADDRESS	9370 S. W. 8TH ST., #102	1.3 STREET ADDRESS	9370 S. W. 8th St. #107
CITY- ST- ZIP	BOCA RATON FL 33428	1.4 CITY- ST- ZIP	Boca Raton, FL 33428
TITLE	V	2.1 TITLE	V /D
NAME	MILLER, JOSEPH	2.2 NAME	Joseph Miller
STREET ADDRESS	9370 SW 8TH ST #206	2.3 STREET ADDRESS	9370 S. W. 7th St. #206
CITY- ST- ZIP	BOCA RATON FL 33428	2.4 CITY- ST- ZIP	Boca Raton, FL 33428
TITLE	D	3.1 TITLE	S/D
NAME	LISABETH, VICTOR	3.2 NAME	Natalie Aronson
STREET ADDRESS	9370 SW 8TH ST #107	3.3 STREET ADDRESS	9370 S. W. 8th St. #101
CITY- ST- ZIP	BOCA RATON, FL 00000	3.4 CITY- ST- ZIP	Boca Raton, FL 33428
TITLE	TD	4.1 TITLE	D
NAME	KANTOR, CONNIE	4.2 NAME	Lois DiSanto
STREET ADDRESS	9370 SW 8 ST	4.3 STREET ADDRESS	9370 S. W. 8th St. #108
CITY- ST- ZIP	BOCA RATON, FL 00000	4.4 CITY- ST- ZIP	Boca Raton, FL 33428
TITLE	SD	5.1 TITLE	
NAME	MASSEY, VIRGINIA	5.2 NAME	
STREET ADDRESS	9370 SW 8 ST #417	5.3 STREET ADDRESS	
CITY- ST- ZIP	BOCA RATON FL 33428	5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # **0041836**

2-28-97 954 344 5353

CR2E037 (9/96)