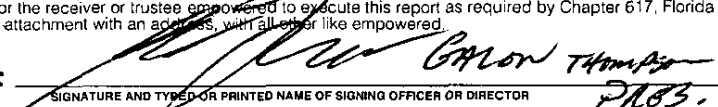


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90006 007 ****61.25

DOCUMENT # 750618 1. Entity Name ISLE OF SANDALFOOT CONDOMINIUM INC. 6					
Principal Place of Business 9370 SOUTHWEST 8TH STREET BOCA RATON, FL 33428			Mailing Address 7932 WILES ROAD POMPAHO BEACH, FL 33067		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-2074079	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ROBERT KAYE & ASSOCIATES, INC. 6261 NW 6 WAY FORT LAUDERDALE, FL 33309				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	PD	☒ Delete	TITLE	DIRECTOR - SEC/TREAS	☐ Change ☒ Addition
NAME	HOLDEN, MICHAEL		NAME	BURNS, WILLIAM	
STREET ADDRESS	9370 SW 8 ST #302		STREET ADDRESS	9370 SW 8 STREET	
CITY-ST-ZIP	BOCA RATON, FL 33428		CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	DVP	☐ Delete	TITLE	DIRECTOR - PRES	☐ Change ☒ Addition
NAME	EBER, ANN		NAME	THOMPSON, GALEN	
STREET ADDRESS	9370 SW 8 ST #217		STREET ADDRESS	9370 SW 8 STREET	
CITY-ST-ZIP	BOCA RATON, FL 33428		CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	DS	☒ Delete	TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	JONES, KIMBERLY		NAME	THOMPSON, ESTHER	
STREET ADDRESS	9370 SW 8 STREET #410		STREET ADDRESS	9370 SW 8 STREET	
CITY-ST-ZIP	BOCA RATON, FL 33428		CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	BURNS, BILL		NAME		
STREET ADDRESS	9370 SW 8 STREET #416		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 33428		CITY-ST-ZIP		
TITLE	D	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	LEONAS, AL		NAME		
STREET ADDRESS	9370 SW 8 STREET #116		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 33428		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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.					
SIGNATURE:  3/17/04 954 3445338 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					