

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 752025 (7)

1. Corporation Name
ISLE OF SANDALFOOT CONDOMINIUM, INC. 4



Principal Place of Business: 9235 SW 8 STREET, BOCA RATON FL 33428
Mailing Address: 9235 SW 8 STREET, BOCA RATON FL 33428

3. Date Incorporated or Qualified: 04/15/1980
3a. Date of Last Report: 03/29/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

4. FEI Number: 59-2266136
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
DAVIS, JOHN
9235 SW 8TH STREE
SUITE 115
BOCA RATON FL 33428

10. Name and Address of New Registered Agent
81 Name: Melvin H. Jacobs
82 Street Address (P.O. Box Number is Not Acceptable): 9235 S. W. 8th St. #203
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 617.0903, Florida Statutes.

SIGNATURE: *Melvin H. Jacobs Pres.* DATE: 3/19/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: PD NAME: DAVIS, JOHN STREET ADDRESS: 9235 SW 8TH ST., #115 CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE: P 1.2 NAME: Melvin H. Jacobs 1.3 STREET ADDRESS: 9235 S. W. 8th St. #203 1.4 CITY-ST-ZIP: Boca Raton, FL 33428
TITLE: V NAME: RIDGE, TOM STREET ADDRESS: 9235 SE 8TH ST #209 CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE: V 2.2 NAME: Vincent Catalfo 2.3 STREET ADDRESS: 9235 S. W. 8th St. #502 2.4 CITY-ST-ZIP: Boca Raton, FL 33428
NAME: CAPECE, DONALD STREET ADDRESS: 9235 SW 8TH ST #404 CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE: S/I 3.2 NAME: Mary Jane Lundberg 3.3 STREET ADDRESS: 9235 S. W. 8th St. #214 3.4 CITY-ST-ZIP: Boca Raton, FL 33428
TITLE: VD NAME: JACOBS, MELVIN H STREET ADDRESS: 9235 SW 8TH ST #203 CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE: T/D 4.2 NAME: John Davis 4.3 STREET ADDRESS: 9235 S. W. 8th St. #115 4.4 CITY-ST-ZIP: Boca Raton, FL 33428
TITLE: S NAME: SCHENBERG, MARIE A. STREET ADDRESS: 9235 SW. 8TH ST. #112 CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> DELETE	5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP:
TITLE: D NAME: RIDGE, TOM STREET ADDRESS: 9235 SW 8TH ST., #209 CITY-ST-ZIP: BOCA RATON FL	<input type="checkbox"/> DELETE	6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-ST-ZIP:

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Melvin H. Jacobs Pres.* DATE: 3/19/96 DAYTIME PHONE #: 408-852-1419

CR2E037 (12/95)