SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Aug 11 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

(0)

1. Corporation	on Name	o (0)			
SANDE	PIPER WOODS TOWNHOMES	ASSOCIATION INC			
ONITO	" EN NOODO TOWNIONEO	- AUUUUIAI IIAO		1 (BB)(B) B((BB)(B) 1((B) 2((B) 1(B)	il Billir Billir Billir Billir Billir Billir Isla
]	
Principal Pla	ce of Business	Malling Address		# # # # # # # # # # # # # # # # # # #	T BEBEL BIBLE BIBLE BIBLE BIBLE BEBEL 1981
SUNVEST MAN	AGEMENT INC	SUNVEST MANAGEMENT-IN			
441 S STATE ROAD SEVEN. STE 4 441 S STATE ROAD SEVEN.				DO NOT WINE	N T/110 CD 4 CF
MARGATE PL 33068 MARGATE FL 33068 US US				DO NOT WRITE I 3. Date Incorporated or Qualified	3a. Date of Last Report
		00		06/01/1984	04/17/1996
2. Principal Place of Business 2a. Mailing Address			_	4. FEI Number	Applied For
	nix Management	26 Phochix M	Hanogen est	59-2472233	Not Applicable
Sulte, Apt		Suite, Apt. #, etc.	•	5. Certificate of Status Desired	\$8.75 Additional
	·StRU7#R	27 541 S. State	WITHIL	o, ostmouto o otato bostica	Fee Required
City & Sta	<i>-</i> .	City & State 28 Kursata	LO.	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 MUZate	Country	Trust Fund Contribution	Added to Fees
24 330		⊢ -	30 USA	8. This corporation owes or has paid Personal Property Tax due June 3	
	9. Name and Address of Current	Registered Agent		10 Name and Address of New Reg	
			81 Name	Phoenia Management So Address (P.O. Box Number is Not Acceptable	T.
SUNVEST MANAGEMENT INC. 82 Street Address				Address (P.O. Box Number is Not Acceptable	nvices, Inc
441 S STATE ROAD SEVEN, STE 4			83 54	1 5. State Rd 7 #	-(<u>Z</u>
MARQATE FL 33068					
			84 City.		85 Zio Code
Add Dissertant	40 db	1017 (500 5) (1 0)	W	larg ate	FL 85 Zin Code
office or	registered agent, or both, in the State o	and 617,1508, Florida Statute: f Florida. Such change was at	s, the above-named uthorized by the cord	corporation submits this statement for the pu poration's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
agent. I e	am familiar with, and accept the obligat			76	0/67
SIGNATURE,	Signifiare, typed or printed name of registered agent	ord Shellan (NOTE	Goldgere Registered Agent signature	required when relaxitation)	7/4/
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	BS AND DIRECTORS IN 12
TITLE		DELETE	1.1 TITLE	D ciccio Jie	☐ Change ☐ Addition
NAME	VANCE, MARGARET	-	1.2 NAME	455 C/F ICHTECK	
STREET ADORESS	440-8E 11 TERRACE		1.3 STREET ADDRESS	455 S.E. 114 Terr Dawa, Fil 33004	
CITY-ST-ZIP	DANIA FL	T occare	1.4 CITY-ST-ZIP		
TITLE	CORDICAN CLAUDIA	☐ DELETE	2.1 TITLE	D Borax, Joec 417 S.E.14 MST	Change Addition
NAME	CORRIGAN, CLAUDIA 452 SE 14 ST		2.2 NAME	417 S.E. 14 K.St	
STREET ADDRESS	DANIA FL		2.3 STREET ADDRESS	Dansa, Fl 33004	,
CITY-ST-ZIP TITLE	D	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	ORINKAWITZ, MIRIAM	A DECEME	3.2 NAME	D Stokrock: Marilyn 422 S.E. /145 Terrack	Change CFAOUICION
STREET ADDRESS	470 SE 11 TERRACE		3.3 STREET ADDRESS		
CITY-ST-ZIP	DANIA FL	_	3.4. CITY-ST-ZIP	Davin FR 33004	
TITLE	VO	DELETE		VD Waldorf Relecca	Change Addition
NAME	DALTON, LARRY		4. 2 NAME	451 SE 11th Terrace	ر
STREET ADDRESS	422_SE-14-ST		4.3 STREET ADDRESS	Dawa, Fl 33004	~
CITY-ST-ZIP	DANIA FL		4.4 City - St - ZIP		
TITLE	SD SUBMITTERS	DELETE	5.1 TITLE	5) Home Deborah 405 5.2.14th 5th	☐ Change ☐ Hodition
NAME	DUNN, TERRI	-	5.2 NAME	405 52 16th 5th	
STREET ADDRESS	450 SE 14 STREET		5.3 STREET ADDRESS	Dava, Fl. 33004	<u>, </u>
CITY-ST-ZIP	DANIA FL TD	D OFFICE P	5.4 CiTY - ST - ZIP	Daux, Tx. 35004	
TITLE	PAOLINI, CHRIS	☐ DELETE '	6.1 TITLE		☐ Change ☐ Addition
NAME ETDEET ANDRESS	5309 NW 66 AVE		6.2 NAME	, , .	
STREET ADDRESS	LAUDERHILL FL		6.3 STREET ADDRESS	8/2/97	
City-St-ZiP 14. I do heret	ov certify that the information supplied v	with this filing does not qualify	for the exemption sta	ated in Section 119.07(3)(i), Florida Statutes.	I further certify that the
informatio	in indicated on this annual report of sur	oplemental annual report is tru le receiver or trustee empower	e and accurate and red to execute this as	that my signature shall have the same legal opport as required by Chapter 617, Florida Sta	affort on if made under eath, that