FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 13 PM 12:06

DOCUMENT # N06590 (6)

1. Corporation Name
SANDALFOOT BOULEVARD ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
10581-228 LANE SOUTH BOCA RATON FL 33428-5758	10581-228 LANE SOUTH BOCA RATON FL 33428-5758

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/12/1984
3a. Date of Last Report: 09/07/1994
4. FEI Number: 59-2551580 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

STEPHENS, DON
10581-228 LANE SOUTH
BOCA RATON FL 33428-5758

10. Name and Address of New Registered Agent

81 Name: Patricia Farber Braica
82 Street Address (P.O. Box Number is Not Acceptable): 10581-228 Lane South
83
84 City: Boca Raton FL 85 Zip Code: 33428

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Patricia Farber — 1/15/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	BRINKMAN, ROBIN	1.2 NAME	
STREET ADDRESS	10498 228 LANE SOUTH	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	HARDING, MARK	2.2 NAME	
STREET ADDRESS	10410-228TH LANE SOUTH	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	VOGEL, GWEN	3.2 NAME	
STREET ADDRESS	10385-228 LANE SOUTH	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33428-5758	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	President ☐ Change ☐ Addition
NAME	STEPHENS, DON	4.2 NAME	Patricia Farber Braica
STREET ADDRESS	10599-228 LANE SOUTH	4.3 STREET ADDRESS	10581-228 Lane South
CITY-ST-ZIP	BOCA RATON FL 33428-5758	4.4 CITY-ST-ZIP	Boca Raton, FL 33428
TITLE	V	5.1 TITLE	Treasurer ☐ Change ☐ Addition
NAME	ANDERSON, LISA	5.2 NAME	Karil Tucker Frank
STREET ADDRESS	10503-228 LANE SOUTH	5.3 STREET ADDRESS	10446-228 Lane South
CITY-ST-ZIP	BOCA RATON FL 33428-5758	5.4 CITY-ST-ZIP	Boca Raton, FL 33428
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	BRADFORD, MARY ANN	6.2 NAME	
STREET ADDRESS	10587 228TH LANE SOUTH	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33428	6.4 CITY-ST-ZIP	

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)(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: Patricia Farber Braica — 1/15/95 — 407-483-9510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0011601