

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY - 1 AM 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N16595** (3)

1. Corporation Name

THE VILLAGE OF SARATOGA POINTE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2845 NORTH MILITARY TRL #15
WEST PALM BEACH FL 33409-2955

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WEST PALM BEACH FL 33409-2955

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1986

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2715861

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt # etc

26 Suite Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3)

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEVEN L. DANIEL, ATTORNEY
SACHS & SAX, ATTORNEYS AT LAW
4150 NORTHERN TRUST PLAZA, 301 YAMATO RD.
BOCA RATON FL 33431

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature of registered agent or bonded agent of registered agent and the incorporator

Signature of Registered Agent (signature required when notifying)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: VPSD
NAME: KARTZMARK, SUSAN
STREET ADDRESS: 2800 EAGLE LANE
CITY ST ZIP: W. PALM BEACH FL

11 TITLE: VPD
12 NAME: Whitmer, Keith
13 STREET ADDRESS: 2815 Gettysburg Ln.
14 CITY ST ZIP: West Palm Beach, Fl. Change Addition

TITLE: TD
NAME: SPIVACK, LESLIE
STREET ADDRESS: 2870 FARRAGUT LANE
CITY ST ZIP: WEST PALM BEACH FL

21 TITLE: PD
22 NAME:
23 STREET ADDRESS:
24 CITY ST ZIP: Change Addition

TITLE: PD
NAME: NELSON, BARRY
STREET ADDRESS: 2895 DUQUESNE CIRCLE
CITY ST ZIP: W. PALM BEACH FL

31 TITLE: SD
32 NAME: Bougae, Erika
33 STREET ADDRESS: 2615 Iroquois Cir.
34 CITY ST ZIP: West Palm Beach, Fl. Change Addition

TITLE: D
NAME: COVELLIO, CARMEN
STREET ADDRESS: 2825 HAWTHORNE LANE
CITY ST ZIP: W. PALM BEACH FL

41 TITLE: TD
42 NAME: Busch, Robert
43 STREET ADDRESS: 2875 Farragut Ln.
44 CITY ST ZIP: West Palm Beach, Fl. Change Addition

TITLE: D
NAME: NEWMAN, ARLENE
STREET ADDRESS: 2850 FARRAGUT LANE
CITY ST ZIP: WEST PALM BEACH FL

51 TITLE:
52 NAME:
53 STREET ADDRESS:
54 CITY ST ZIP: Change Addition

TITLE:
NAME:
STREET ADDRESS:
CITY ST ZIP:

61 TITLE:
62 NAME:
63 STREET ADDRESS:
64 CITY ST ZIP: Change Addition

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 110.07(3)(g), 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: *Leslie Spivack* Leslie Spivack
SIGNATURE AND TYPED OR PRINTED NAME OF BONDING OFFICER OR DIRECTOR

April 29, 1995 407-697-5157
Date Telephone Number