

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N16595 (3)
1. Corporation Name
THE VILLAGE OF SARATOGA POINTE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: 2845 NORTH MILITARY TRL. #15 WEST PALM BEACH FL 33409-2955
Mailing Address: 2845 NORTH MILITARY TRL. #15 WEST PALM BEACH FL 33409-2955

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	22	26	27	09/02/1986	05/01/1996
4. FEI Number		Applied For		Not Applicable	
59-2715861					
5. Certificate of Status Desired				\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution				\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
STEVEN L. DANIEL, ATTORNEY
SACHS & SAX, ATTORNEYS AT LAW
4160 NORTHERN TRUST PLAZA, 301 YAMATO RD.
BOCA RATON FL 33431

10. Name and Address of New Registered Agent
81 Name: Edward Dicker
82 Street Address (P.O. Box Number is Not Acceptable): 500 Australian Ave
83
84 City: West Palm Beach FL 85 Zip Code: 33401

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 617.0503, Florida Statutes.
SIGNATURE: Edward Dicker of St John Dicker & Coysdan 4/5/97

12. OFFICERS AND DIRECTORS

TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	WHITMER, KEITH	
STREET ADDRESS	2815 GETTYSBURG LANE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SPIVACK, LESLIE	
STREET ADDRESS	2870 FARRAGUT LANE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	BOUGAE, ERIKA	
STREET ADDRESS	2615 IROQUOIS CIRCLE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	BUSCH, ROBERT	
STREET ADDRESS	2875 FARRAGUT LANE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	BOUGAE, ARTHUR	
STREET ADDRESS	2615 IROQUOIS CIRCLE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Proctor, (Skip) Hugh	
1.3 STREET ADDRESS	2980 Burgoyne Lane	
1.4 CITY-ST-ZIP	West Palm Beach FL	
2.1 TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP	D	
4.1 TITLE	Hughes, Donald	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	2845 Cuyahoga Lane	
4.3 STREET ADDRESS	West Palm Beach FL	
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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: Skip Proctor 2/27/97 241-182-805

CR2E037 (9/96)