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Secretary of State

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N31209

1. Corporation Name

SUN VALLEY EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1215 E. HILLBORO BLVD  
DEERFIELD BEACH FL 33441

Mailing Address

1215 E. HILLBORO BLVD  
DEERFIELD BEACH FL 33441



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

3. Date Incorporated or Qualified

03/15/1989

4. FEI Number

65-0203808

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

9. Name and Address of Current Registered Agent

CAMPBELL PROPERTY MGMT. CO.  
1215 E. HILLBORO BLVD  
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

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 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P

RICHMAN, JULIE  
9704 SILLS DR. E #201  
BOYNTON BEACH FL 33437

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

V

KATZ, BOB  
9680 SILL DR E #104  
BOYNTON BEACH FL 33437

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S

SANDLER, ALVIN  
9692 SILLS DRIVE EAST #201  
BOYNTON BCH FL 33437

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

T

WARSHAWSKY, MITCHELL  
9747 PAVAROTTI TERRACE #102  
BOYNTON BEACH FL 33437

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D

MILLER, MICKEY  
9723 PAVAROTTE TERRACE #104  
BOYNTON BEACH FL 33437

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D

COHEN, JULES  
9784 PAVAROTTI TERRACE #103  
BOYNTON BEACH FL 33437

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

T

SIVIN, EDWARD  
9699 PAVAROTTI TERR #102  
BOYNTON BEACH, FL 33437

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

D

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD H. SIVIN  
TREASURER

Date

4/16/99 (561) 735-9364

Daytime Phone #

CR2E037-(11/98)