

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001616

FILED
Jan 09, 2009
Secretary of State

Entity Name: SANDHILL TRACE AT IBIS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PRIME MGMT
2074 W INDIANTOWN RD 200
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

PRIME MGMT
2074 W INDIANTOWN RD 200
JUPITER, FL 33458

New Mailing Address:

FEI Number: 65-0652753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIELDS, GARY ESQ
ADMIRALTY TOWER-STE 900
4400 PGA BLVD
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KYMAN, LARRY
Address: 7916 SANDHILL CT
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D () Delete
Name: TIRSCH, LEON
Address: 7816 SANDHILL CT
City-St-Zip: WEST PALM BEACH, FL 33412

Title: S () Delete
Name: PATTY, ABRAHAM
Address: 7733 SANDHILL COURT
City-St-Zip: WEST PALM BEACH, FL 33412

Title: VP () Delete
Name: SORKIN, BARBAR
Address: 7904 SANDHILL COURT
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D () Delete
Name: KALT, ALLAN
Address: 8026 SANDHILL CT
City-St-Zip: WEST PALM BEACH, FL 33412

Title: T () Delete
Name: LEVINSON, RICH
Address: 7712 SANDHILL CT
City-St-Zip: WEST PALM BEACH, FL 33412

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KIRSCH, MICHAEL
Address: 7784 SANDHILL CT
City-St-Zip: WEST PALM BEACH, FL 33412

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY KYMAN

P

01/09/2009

Electronic Signature of Signing Officer or Director

Date