

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 750340 (2)

1. Corporation Name

SABAL PALM CONDOMINIUMS OF PINE ISLAND RIDGE ASSOCIATION, INC.

Principal Place of Business

1901 PINE RIDGE DRIVE
FT. LAUDERDALE FL 33324

Mailing Address

1901 PINE RIDGE DRIVE
FT. LAUDERDALE FL 33324



3. Date Incorporated or Qualified
09/21/1979

3a. Date of Last Report
03/22/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number
59-1992773

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

RICHARD H. NEWELL
1901 PINE RIDGE DRIVE
FT LAUDERDALE FL 33324

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

Richard H. Newell

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

(NOTE: Registered Agent Signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

FARQUHAR, JOHN
400 W TROPICAL WAY
PLANTATION FL

CITY-ST-ZIP

TITLE

DP

☐ DELETE

NAME

NEWELL, RICHARD
1911 SABAL PALM DR #401
FT LAUDERDALE FL

CITY-ST-ZIP

TITLE

T

☐ DELETE

NAME

RUDER, SAMUEL
1920 SABAL PALM DR #204
FT LAUDERDALE FL

CITY-ST-ZIP

TITLE

S

☐ DELETE

NAME

CURTIS, DORIS
2704 PINWOOD CT
DAVIE FL

CITY-ST-ZIP

TITLE

VP

☐ DELETE

NAME

GREENSPAN, EMANUEL
1931 SABAL PALM DR., #106
FT LAUDERDALE FL

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D

☐ Change

☒ Addition

1.2 NAME

IRVING EDELMAN

1.3 STREET ADDRESS

9520 SEAGRAPE DRIVE #206

1.4 CITY-ST-ZIP

FT. LAUDERDALE, FL. 33324

2.1 TITLE

D

☐ Change

☒ Addition

2.2 NAME

AARON TRUBAKOFF

2.3 STREET ADDRESS

1931 SABAL PALM DRIVE #301

2.4 CITY-ST-ZIP

FT. LAUDERDALE, FL. 33324

3.1 TITLE

D

☐ Change

☒ Addition

3.2 NAME

PAUL WOLF

3.3 STREET ADDRESS

1811 SABAL PALM DRIVE #305

3.4 CITY-ST-ZIP

FT. LAUDERDALE, FL. 33324

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Richard H. Newell

Richard H Newell 5/20/96

(954) 472-5356

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #

CR2E037 (12/95)