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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
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DOCUMENT # 762043

1. Corporation Name

SAYBROOK MANOR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

101 CAPRI ISLES BLVD
VENICE FL 34292

Mailing Address

101 CAPRI ISLES BLVD
VENICE FL 34292



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	02/22/1982
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	59-2168484
City & State	City & State	5. Certificate of Status Desired <input type="checkbox"/>
23	28	\$8.75 Additional Fee Required
Zip	Zip	6. Election Campaign Financing
24	29	Trust Fund Contribution <input type="checkbox"/>
Country	Country	\$5.00 May Be Added to Fees
25	30	

9. Name and Address of Current Registered Agent

CROSS, DARLENE
PALM REALTY
200 CAPRI ISLES BLVD
VENICE FL 34292

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D PRESIDENT <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSSANO, DONNA	1.2 NAME	
STREET ADDRESS	259 FENWICK DR #35	1.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34292	1.4 CITY-ST-ZIP	
TITLE	D SELLERS, NANCY <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3524 MEADOW RUN DR	2.2 NAME	
STREET ADDRESS	VENICE FL 34293	2.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34293	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLAYTON, MARGARET	3.2 NAME	
STREET ADDRESS	255 FENWICK DR #25	3.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34292	3.4 CITY-ST-ZIP	
TITLE	D SNOW, WILLIAM <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	259 FENWICK DR #37	4.2 NAME	ELIZABETH BISHA
STREET ADDRESS	VENICE FL 34292	4.3 STREET ADDRESS	SEC. 251 FENWICK DR. #12.
CITY-ST-ZIP	VENICE FL 34292	4.4 CITY-ST-ZIP	VENICE, FL. 34292
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHIANO, ANDY	5.2 NAME	T. J. BOUHMID
STREET ADDRESS	828 FIRE ISLAND AVE	5.3 STREET ADDRESS	251 FENWICK DR. #15.
CITY-ST-ZIP	WEST ISLIP NY 11795	5.4 CITY-ST-ZIP	VENICE, FL. 34292
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: Margaret M. Clayton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/99

941-316-1460

Date

Daytime Phone #

CR2E037 (11/98)