

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006957

FILED
Apr 27, 2007
Secretary of State

Entity Name: SABAL PALM VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

401 N.E. FIRST COURT
12
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

401 N.E. FIRST COURT
12
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 65-0953739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RC REAL ESTATE
700 NE 4TH CT. #1
HALLANDALE, FL 33009 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: D () Delete
Name: MIHALIK, RON
Address: 401 NE 1ST COURT, #10
City-St-Zip: HALLANDALE, FL 33009

Title: S () Delete
Name: SAFFOLD, VANESSA
Address: 401 NE 1ST CT#
City-St-Zip: HALLANDALE, FL 33009

Title: PD () Delete
Name: ALVAREZ, HARLEY
Address: 401 NE 1ST CT #7
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ALEJANDRA, CARPIO
Address: 401 NE 1ST COURT, #1
City-St-Zip: HALLANDALE, FL 33009

Title: S (X) Change () Addition
Name: CAROLINA, HUMPHREY
Address: 401 NE 1ST CT#5
City-St-Zip: HALLANDALE, FL 33009

Title: PD (X) Change () Addition
Name: HELENA, ISTIRANEOPULOS
Address: 401 NE 1ST CT #4
City-St-Zip: HALLANDALE, FL 33009

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: HELENA ISTIRANEOPULOS

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date