2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# 728926

Entity Name: SABAL PALM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5000 EAST SABAL PALM BLVD
CLUB HOUSE
TAMARAC, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

5000 EAST SABAL PALM BLVD
CLUB HOUSE
TAMARAC, FL 33319 US

New Mailing Address:

FEI Number: 59-1565548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RUBINSTEIN, ROBERT ESQ
2255 GLADES ROAD
SUITE 300 E
BOCA RATON, FL 33431 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:	LUTWIN, WARREN	
Address:	5180 EAST SABAL PALM #325	
City-St-Zip:	TAMARAC, FL 33319 US	
Title:	VP	( ) Delete
Name:	DEBENNEDETTO, MARIO	
Address:	4990 E SABAK PALM BLVD, #317	
City-St-Zip:	TAMARAC, FL 33319	
Title:	D	( ) Delete
Name:	MALLEY, MIKE	
Address:	5180 E SABAL PALM BLVD #241	
City-St-Zip:	TAMARAC, FL 33319	
Title:	D	( ) Delete
Name:	CARRIERE, ROGER	
Address:	5180 EAST SABAL PALM BLVD #240	
City-St-Zip:	TAMARAC, FL 33319 US	
Title:	D	( ) Delete
Name:	CONDO, SALVATORE	
Address:	5180 E SABAL PALM BLVD, 128	
City-St-Zip:	TAMARAC, FL 33319	
Title:	P	( ) Delete
Name:	TURNQUEST, VICTOR	
Address:	4990 E SABAL PALM BLVD, #102	
City-St-Zip:	TAMARAC, FL 33319	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: VICTOR TURNQUEST P 01/09/2009
Electronic Signature of Signing Officer or Director — Date