

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 28, 2003 8:00 am**  
**Secretary of State**

02-28-2003 90127 022 \*\*\*\*61.25

**DOCUMENT # 732058**

1. Entity Name

**SABAL CHASE TOWNHOME ASSOCIATION, INC.**



Principal Place of Business

**12079 S.W. 131ST AVE.  
MIAMI FL 33186**

Mailing Address

**12079 S.W. 131ST AVE.  
MIAMI FL 33186**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1672020**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SKRLD, INC  
201 ALHAMBRA CIRCLE  
SUITE #1102  
MIAMI FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	<b>D</b> <b>GARREN, ROY</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>11133 SW 113 PL</b>	
CITY-ST-ZIP	<b>MIAMI FL 33176</b>	
TITLE NAME	<b>TD</b> <b>BROWN, ARNIE</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>11233 S.W. 112TH STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE NAME	<b>D</b> <b>BAN, STEPHAN</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>11016 SW 112 AVE.</b>	
CITY-ST-ZIP	<b>MIAMI FL 33176</b>	
TITLE NAME	<b>PD</b> <b>MARGOLUIS, HOWARD</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>11225 S.W. 112TH STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE NAME	<b>SD</b> <b>LEFKOWITZ, JOEL</b>	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	<b>11209 SW 111 STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL 33176</b>	
TITLE NAME	<b>VPD</b> <b>MISICK, ROBERT</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>11410 SW 110 LANE</b>	
CITY-ST-ZIP	<b>MIAMI FL 33176</b>	

TITLE NAME	<b>VPD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>Garren, Roy</b>	
CITY-ST-ZIP	<b>11133 SW 113 PL, Miami, FL 33176</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<b>SD</b> <b>Armstrong, Ted</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	<b>11425 SW 111 Street</b>	
CITY-ST-ZIP	<b>Miami, FL 33176</b>	
TITLE NAME	<b>D</b> <b>Margoluis, Howard</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>11225 SW 112th Street</b>	
CITY-ST-ZIP	<b>Miami, FL 33176</b>	
TITLE NAME	<b>D</b> <b>Montgomery, Sara</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	<b>11225 SW 111 Street</b>	
CITY-ST-ZIP	<b>Miami, FL 33176</b>	
TITLE NAME	<b>PD</b> <b>Misick, Robert</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>11410 SW 110 Lane</b>	
CITY-ST-ZIP	<b>Miami, FL 33176</b>	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Arnold Brown, Treasurer 2/24/03 305-596-0021*

CR2E037 (10/02)