

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723429

FILED
Feb 01, 2010
Secretary of State

Entity Name: SANTA BARBARA GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

CONDOMINIUM ASSOCIATION INC
2201 S.E. 9TH STREET
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

CONDOMINIUM ASSOCIATION INC
2201 S.E. 9TH STREET
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-1651957 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KAYE & BENDER, P.L.
6261 NW 6 WAY STE 103
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

KAYE & BENDER, P.L.
1200 PARK CENTRAL BOULEVARD SOUTH
POMPANO BEACH, FL 33064 US

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

02/01/2010

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SCHAEFER, FRED
Address: 1 LAUDERDELL DR
City-St-Zip: OCEAN VIEW, NJ 08230

Title: ST
Name: IRINGTON, JANICE
Address: 2201 S E 9TH ST #202
City-St-Zip: POMPANO BEACH, FL 33062

Title: D
Name: LILLEY, KATHY
Address: 8640 TRENTON DR
City-St-Zip: WHITE LAKE, MI 48386

Title: V
Name: ANTOINE, MARY
Address: 2201 SE 9TH STREET #103
City-St-Zip: POMPANO BEACH, FL 33062

Title: D
Name: SIPE, MIKE
Address: 4803 KENSINGTON CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33076

I hereby 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 all other like empowered.

SIGNATURE: JANICE IRINGTON

ST

02/01/2010

Electronic Signature of Signing Officer or Director

Date