2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723714

Entity Name: SABAL/PINE CONDOMINIUMS, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
2500 SW 22 AVENUE DELRAY BEACH, FL 33445				2500 SW 22ND AVE DELRAY BEACH, FL 33445				
Current Mailing Address:				New Mailing Address:				
2500 SW 22 AVENUE DELRAY BEACH, FL 33445				C/O FLORIDA ONE PROPERTY MANAGEMENT PO BOX 880269 BOCA RATON, FL 33488				
FEI Number: 59-1435052 FEI Number Applied For ()		FEI Nun	I Number Not Applicable () Certi		Certificate of Status	ertificate of Status Desired ()		
Name and Address of Current Registered Agent: Name					ame and Address of New Registered Agent:			
625 NO. FL WEST PAL	.M BEACH, FL named entity s	- 7TH FLOOR	irpose o	f changing it	ts registered of	ffice or registered a	gent, or both,	
SIGNATUR								
Electronic Signature of Registered Agent				Date				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	VD () I DISCIPIO, CASM 2360 SW 22 AVE DELRAY BEACH	UNIT 407		Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	D () I CERAHOLD, SAI 2640 SW 22 AVE DELRAY BEACH	ENUE UNIT 1109		Title: Name: Address: City-St-Zip:	CATALDO, SAB	ENUE UNIT 1406		
Title: Name: Address: City-St-Zip:	PD (X) ZAMBRANO, FR 2300 SW 22ND DELRAY BEACH	AVE, UNIT 118		Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	TD () MORIN, RAYMO 2460 SW 22 AVE DELRAY BEACH	EUNIT 806		Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	S () HELSER, BEVER 2440 SW 22 AVE DELRAY BEACH	UNIT 717		Title: Name: Address: City-St-Zip:	S (X) HAROS, JOANN 2320 SW 22 AV DELRAY BEACH	E UNIT 204		
Title: Name: Address: City-St-Zip:	D (X) DANGALO, ANN 2440 SW 22ND A DELRAY BEACH	AVE UNIT 707		Title: Name: Address: City-St-Zip:	()	Change () Addition		

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: WILLIAM RUSSO AGEN 04/28/2008