FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 728111

SANDALFOOT BOULEVARD APARTMENTS, BUILDING 401. A SSOCIATION, INC.

Princ	ipal Place of E	susines
9915	SANDALFOOT	BLVD.

Mailing Address

DOME CANDALEDOT BLVD

FILED Mar 02, 1999 8:00 am § Secretary of State

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BOCA RATON		BOCA RATON FL 33428						
2. Principal Place of Business		2a. Mailing Address			3. Date Incorporated or Qualifed 11/19/1973			
21		26 Out And the sta			4. FEI Number Applied For			
Suite, Apt. #, etc.		├ ─┐	Suite, Apt. #, etc.		59-1444519		t Applicable	
22		City & State	City & State			\$8.75		
City & State		28 28	City a State		5. Certificate of Status Desired Fee Required			
Zip	Country	Zip			6. Election Campaign Financing	May Be		
24	25 29 30]		Trust Fund Contribution	Added t	o Fees	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Ag	ent		
			81	Name	•		,	
SWEENEY	r, Eleanor S		82	Street	Address (P.O. Box Number is Not Acceptable)			
	IDALFOOT BLVD. #410					`	 .	
BOCA RATON FL 33428			83					
			84	City	P 1	85 Zip (Code	
			نــلــــــــــــــــــــــــــــــــــ		FL J		istored	
office or a gent. I a	registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such channe was alline	nnzen nv	I'le COIDE	corporation submits this statement for the purpose of ch oration's board of directors. I hereby accept the appointn	nent as re	gistered	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Reç	gistered Agen	t signature n	equired when reinstating) DATE			
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	Р	☐ DELETE	1.1 TITLE			Change	Addition	
NAME	CURRIVAN CHRISTENE		1.2 NAME		DOMINIC DANTUONO	•		
STREET ADDRESS			1.3 STREET	ADDRESS	9915 SANDALFOOT BLVP			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY+S	T-23P	BOCA RATON, FL			
TITLE	V	☐ DELETE	2.1 TTLE		<i>V</i>	Change	☐ Addition	
NAME	GIGANTE, NICHOLAS		2.2 NAME		CURRIVAN, CHRISTINE 9915 SANBALFOOT BLVD			
STREET ADDRESS			2.3 STREET	ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-S	T-ZiP	BOCA RATON, FL			
TITLE	TS	☐ DELETE	31TITLE		11.3	Change	☐ Addition	
NAME	SWEENEY, ELANOR S		3.2 NAME		SWEENEY, PLEANOR 9			
STREET ADDRESS	9915 SANDALFOOT BLVD		3.3 STREET	ADDRESS	9915 SAKDALFOOT BLVD			
CITY-ST-ZIP	BOCA RATON FL 33428		3.4. CITY-	T-ZIP	BOCA RATON FL	<u>.</u>		
TITLE	D	☑ DELETE	4.1 TITLE		` `	Change	Audition	
NAME	RUSSO, ANTHONY		4. 2 NAME		STEWART, BONNIE			
STREET ADDRESS	1 '		4.3 STREE	ADDRESS	9915 SANDALFOOT BLUD			
CITY-ST-ZIP	BOCA RATON FL 33428		4.4 CITY-S	T-ZIP	BOCA RATOH, EL	F7.6k		
TITLE	D	☐ DELETE	5.1 TITLE			Change	Addition	
NAME	GIGANTE, NICHOLAS		5.2 NAME		GICANTE, NICHOLAS			
STREET ADDRESS	9915 SANDALFOOT BLVD				9915 SANDALFOOT BLVD			
CITY-ST-ZIP	BOCA RATON FL 33428		5.4 CITY-S	T-ZIP	BOCA RATON, FL		- A - A - A - A - A - A - A - A - A - A	
TITLE	D	DELETE	6.1 TITLE			Change	Addition	
NAME	DICKMAN, WILLIAM		6.2 NAME					
STREET ADDRESS	· '		6.3 STREE	TADORESS				
CITY-ST-7IP	BOCA BATON FL 33428		6.4 CITY-S	T- ZIP				

BOCA RATON FL 33428 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: