

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728111

FILED
Jan 28, 2009
Secretary of State

Entity Name: SANDALFOOT BOULEVARD APARTMENTS, BUILDING 401, ASSOCIATION, INC.

Current Principal Place of Business:

9915 SANDALFOOT BLVD.
BLDG 401
BOCA RATON, FL 33428 PB

New Principal Place of Business:

Current Mailing Address:

9915 SANDALFOOT BLVD.
BLDG 401
BOCA RATON, FL 33428 PB

New Mailing Address:

FEI Number: 59-1444519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABDURRAHMAN MALIK
9915 SANDALFOOT BLVD.
APT # 409
BOCA RATON, FL 33428 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: P () Delete
Name: CURRIVAN, CHRITINE
Address: 9915 SANDALFOOT BLVD. APT #417
City-St-Zip: BOCA RATON, FL 33428 PB

Title: VP () Delete
Name: TAGGERT, JAMES
Address: 9915 SANDALFOOT BLVD. APT # 416
City-St-Zip: BOCA RATON, FL 33428 PB

Title: TS () Delete
Name: MALIK, ABDURRAHMAN
Address: 9915 SANDALFOOT BLVD APT # 409
City-St-Zip: BOCA RATON, FL 33428 PB

Title: D () Delete
Name: STEWART, BONNIE
Address: 9915 SANDALFOOT BLVD APT # 403
City-St-Zip: BOCA RATON, FL 33428 PB

Title: D () Delete
Name: EGLI, MAX
Address: 9915 SANDALFOOT BLVD; APT # 401
City-St-Zip: BOCA RATON, FL 33428 PB

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: P (X) Change () Addition
Name: STEWART, BONNIE
Address: 9915 SANDALFOOT BLVD APT # 403
City-St-Zip: BOCA RATON, FL 33428 PB

Title: D (X) Change () Addition
Name: CHRIS, MANCUSO
Address: 9915 SANDALFOOT BLVD; APT # 413
City-St-Zip: BOCA RATON, FL 33428 PB

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: ABDURRAHMAN MALIK

TS

01/28/2009

Electronic Signature of Signing Officer or Director

Date