

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90006 015 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 734079

1. Corporation Name

THE SANCTUARY HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business
 4500 N. FEDERAL HIGHWAY
 BOCA RATON FL 33431

Mailing Address
 4500 N. FEDERAL HIGHWAY
 BOCA RATON FL 33431



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/14/1975	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1935468	
24 Country		29 Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
STEELE, FRANK 4500 N. FEDERAL HIGHWAY BOCA RATON FL 33431			81 Name: <u>Robert A. Przybylski</u> 82 Street Address (P.O. Box Number is Not Acceptable): 83 <u>4500 N. Federal Highway</u> 84 City: <u>Boca Raton</u> FL Zip Code: <u>33431</u>		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE: <u>Robert A. Przybylski</u> (NOTE: Registered Agent signature required when reinstating) DATE: _____					
12. OFFICERS AND DIRECTORS					
TITLE	PD	☐ DELETE			
NAME	GOULD, ANNA				
STREET ADDRESS	5078 EGRET POINTE CIRCLE				
CITY-ST-ZIP	BOCA RATON FL 33431				
TITLE	VD	☒ DELETE			
NAME	STEELE, FRANK				
STREET ADDRESS	4955 SANCTUARY LANE				
CITY-ST-ZIP	BOCA RATON FL 33431				
TITLE	STD	☒ DELETE			
NAME	KANE, CHRIS				
STREET ADDRESS	5014 SANCTUARY LANE				
CITY-ST-ZIP	BOCA RATON FL 33431				
TITLE	D	☐ DELETE			
NAME	PRZYBYLSKI, ROBERTA				
STREET ADDRESS	575 SANDPIPER WAY				
CITY-ST-ZIP	BOCA RATON FL 33431				
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE		VP ☒ Change ☐ Addition			
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE		STD ☐ Change ☒ Addition			
2.2 NAME		OSCAR Zimmerman			
2.3 STREET ADDRESS		4401 Sanctuary Lane			
2.4 CITY-ST-ZIP		Boca Raton, FL 33431			
3.1 TITLE		D ☐ Change ☒ Addition			
3.2 NAME		Marilyn Wilson			
3.3 STREET ADDRESS		4400 Sanctuary Lane			
3.4 CITY-ST-ZIP		Boca Raton, FL 33431			
4.1 TITLE		PD ☒ Change ☐ Addition			
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE		☐ Change ☐ Addition			
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE		☐ Change ☐ Addition			
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					

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:

SIGNATURE REQUIRED

1/19/99

54-998-3311

CR2E037 (1/98)