

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 742216 (5)

1. Corporation Name

SABAL PINE SOUTH ASSOCIATION, INC.



Principal Place of Business

2840 SW 22ND AVE  
DELRAY BEACH FL 33445

Mailing Address

2840 SW 22ND AVE  
DELRAY BEACH FL 33445

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified  
03/28/1978

3a. Date of Last Report  
05/01/1995

4. FEI Number

59-1932728

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIONNE, AUDREY M.  
2960 SW 22ND AVENUE  
DELRAY BEACH, FL 33445

81 Name

MCRAE, FLORENCE

82 Street Address (P.O. Box Number is Not Acceptable)

2840 SW 22ND AVENUE

83

84 City

DELRAY BEACH

FL

85

Zip Code  
33445

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

FLORENCE MCRAE (PRES) Florence McRae

4-23-96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DVP  
NAME STEWART, PATRICIA  
STREET ADDRESS 2840 SW 22 AVE  
CITY-ST-ZIP DELRAY BEACH FL  
☒ DELETE

TITLE P  
NAME DIONNE, AUDREY  
STREET ADDRESS 2960 SW 22 AVE  
CITY-ST-ZIP DELRAY BEACH FL  
☒ DELETE

TITLE D  
NAME MCRAE, FLORENCE  
STREET ADDRESS 2920 SW 22NDA AVE  
CITY-ST-ZIP DELRAY BCH FL  
☐ DELETE

TITLE D  
NAME BARNETT, LYNN  
STREET ADDRESS 2960 SW 22ND AVE  
CITY-ST-ZIP DELRAY BEACH FL  
☐ DELETE

TITLE D  
NAME MIRIZIO, CONRAD  
STREET ADDRESS 2920 SW 22ND  
CITY-ST-ZIP DELRAY BCH FL  
☐ DELETE

TITLE D  
NAME ZIELSKE, JAMES  
STREET ADDRESS 2860 SW 22ND AVE  
CITY-ST-ZIP DELRAY BCH FL  
☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1.1 TITLE D/T  
1.2 NAME ANNETTE FEMINELLA  
1.3 STREET ADDRESS 2940 SW 22 AVE  
1.4 CITY-ST-ZIP DELRAY BEACH FL 33445  
☒ Change ☒ Addition

2.1 TITLE D  
2.2 NAME WILBUR DOUST  
2.3 STREET ADDRESS 2840 SW 22ND AVE  
2.4 CITY-ST-ZIP DELRAY BEACH FL 33445  
☒ Change ☒ Addition

3.1 TITLE P/D  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☒ Addition

4.1 TITLE 900001798989  
4.2 NAME -04/29/96--01072--008  
4.3 STREET ADDRESS \*\*\*61.25  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE V /D  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☒ Addition

6.1 TITLE D  
6.2 NAME RITA GENTILE  
6.3 STREET ADDRESS 2830 SW 22ND AVE  
6.4 CITY-ST-ZIP DELRAY BEACH FL 33445  
☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FLORENCE MCRAE

Apr 12, 1996-276-6296  
Date Daytime Phone #

CR2E037 (12/95)