

FILE NOW: FILING FEE IS \$61.25

FILED
Sep 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra E. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 742216
1. Corporation Name

Sabal Pine South Association, Inc.

Principal Place of Business

Mailing Address

2840 S.E. 22nd Avenue

3. Date Incorporated or Qualified

03/28/1978

4. FEI Number

59-1932728

Applied For

Not Applicable

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

Delray Beach

28

Zip

Country

24

33445

25

Palm Beach

29

Zip

Country

24

33445

25

Palm Beach

29

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81

Name **LINDA M. Giles**

82

Street Address (P.O. Box Number is Not Acceptable)
2960 S.W. 22 Avenue #808

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

Linda M. Giles **PRESIDENT**

6/5/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** **Dionne, Audrey** ☐ DELETE
NAME
STREET ADDRESS **2960 SW 22nd Avenue #802**
CITY-STATE-ZIP **Delray Beach, FL 33445**

1.1 TITLE **P** **Giles, Linda M.** ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **2960 SW 22nd Avenue #808**
1.4 CITY-STATE-ZIP **Delray Beach, FL 33445**

TITLE **D** **Datri, Charles** ☐ DELETE
NAME
STREET ADDRESS **2800 SW 22nd Avenue #113**
CITY-STATE-ZIP **Delray Beach, FL 33445**

2.1 TITLE **D** **Brown, Richard** ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **2900 SW 22nd Avenue #511**
2.4 CITY-STATE-ZIP **Delray Beach, FL 33445**

TITLE **D** **Feminella, Annette** ☐ DELETE
NAME
STREET ADDRESS **2940 SW 22nd Avenue #712**
CITY-STATE-ZIP **Delray Beach, FL 33445**

3.1 TITLE **D** **DiSessa, Fred** ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS **2840 SW 22nd Avenue #305**
3.4 CITY-STATE-ZIP **Delray Beach, FL 33445**

TITLE **D** **Mirizzio, Conrad** ☐ DELETE
NAME
STREET ADDRESS **2920 SW 22nd Avenue #605**
CITY-STATE-ZIP **Delray Beach, FL 33445**

4.1 TITLE **D** **Campbell, William** ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS **2900 SW 22nd Avenue #517**
4.4 CITY-STATE-ZIP **Delray Beach, FL 33445**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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.

SIGNATURE:

Linda M. Giles

6/05/98

CR2E037 (10/97)