FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



AVE.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 742216

Corporation Name

SABAL PINE SOUTH ASSOCIATION, INC.

Principal Place of Business 2840 SW 22ND AVE DELRAY BEACH FL 33445

2. Principal Place of Business 21 2840 SW 22nd Mailing Address

2840 SW 22ND AVE DELRAY BEACH FL 33445

2a. Mailing Address

Quite Ant # etc

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SAME

FILED Aug 09, 1999 8:00 am Secretary of State

08-09-1999 90003 047 ****70.00



Applied For



3. Date Incorporated or Qualifed

03/28/1978

4. FEI Number

Suite, Apt.	#, etc.	Mana, Apr. #, ctc. X			59-1932728	as Not	Applicable	
22		27			39 1902720	\$8.75 A		
City & State	ELRAY BCH. FL A.	City & State SAME			5. Certificate of Status Desired YES	Fee Rec		
Zip	Country	H- CAME -	Country SAM	 मः	6. Election Campaign Financing	\$5.00 to Added to	· 1	
2433445	23	29 1301	יעמט		Trust Fund Contribution		7 - 663	
	9. Name and Address of Current F	Registered Agent	10. Name and Address of New Registered Agent 81 Name					
				audrey dionne				
GILES, LINDA M				82 Streep Asid 9s (P.O. Box Number is Not Acceptable) SW 22nd Ave.				
2960 SW 22 AVE., #808					SW 22nd Ave.			
DELRAY BEACH FL 33445				#802				
				94 City 85 Zip Code				
				DELRAY BCH.				
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes, t	he above	-named como	ration submits this statement for the numose	of changing its	registered	
office or n	egistered agent, or both, in the State of	Florida, Such change was autho	rized by 1	ne corporation	n's board of directors. I hereby accept the app	JOHILLICHT AS 186	pater ou	
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE AUDREY DIONNE. PRESIDENT Audum Number 8/3/99								
SIGNATURE	AUDREL DIONNE, I		istepid Agen	signature required				
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS			
TITLE	D	DELETE	1.1 TITLE	D'	ANNETTA FEMMINELLA	Change	Addition	
NAME	FEMINELLA, ANNETTE		1.2 NAME			u .		
STREET ADDRESS	2940 SW 22 AVE., #712	1	1.3 STREET	ADDRESS .	Retay Sun, 22pd. AVE 44	1 712		
CITY-ST-ZIP	DELRAY BEACH FL 33445	1	1.4 CITY-ST	-ZIP T)	BELAI BUR, FI. 33443	v		
TITLE	D	1 DELETE	2.1 TITLE	D		Change	☐ Addition	
NAME	CATRI, CHARLES	u en -	2.2 NAME	J	ohn Chetta, #			
STREET ADDRESS	2800 SW 22ND AVE., #113		2.3 STREET	ADDRESS 2	800 SW 22ND AVE., #	rog		
CITY-ST-ZIP	DELRAY BEACH FL 33445	1	2. 4 CITY-S	_{r-zip} D	elray Beach, FL 33	1 45		
TITLE	DELINAT DEMOTTE 30445	☐ DELETE	3.1 TITLE	PD		Change	Addition .	
NAME	DIONNE, AUDREY		3.2 NAME	A	udrey Dionne			
STREET ADDRESS	2960 S.W. 22ND AVE., #802		3.3 STREET		2960 SW 22ND &VE. #	802		
	DELRAY BEACH FL 33445		3.4. CITY-S		elray Beach, FL 334	11.5		
CITY-ST-ZIP TITLE		₽ DELETE	4.1 TITLE	₩	ray beaute and John	☐ Change	X Addition	
NAME	P INDA N		4. 2 NAME	Y Tai	iller Danat			
	GILES, LINDA M	Į	4.3 STREET		Vilbur Daust			
STREET ADDRESS	2960 SW 22ND AVE., #808	1	4.4 CITY-ST	~	840 SW 22nd AVE., #			
CITY-ST-ZIP	DELRAY BEACH FL 33445	[] DELETE	5.1 TITLE	·4r]	elray Beach, FL 33	Change	☐ Addition	
TITLE	D CONDAD	U DELETE	5.2 NAME	-	onrad Mirizzio		_	
NAME	MIRIZZIO, CONRAD		5.3 STREET		2920 SW 22ND AVE., #6	605		
STREET ADDRESS	2920 S.W. 22ND AVE., #605	1	5.4 CITY-S					
CITY-ST-ZIP	DELRAY BEACH FL 33445	☐ DELETE	6.1 TITLE	-41-	elray Beach, FL 334	Change	Addition	
TITLE	D	U DELETE		R	Richard Brown	L. J Onlange		
NAME	BROWN, RICHARD		6.2 NAME	II.	2900 SW 22ND AVE., #	<11		
STREET ADDRESS	2900 SW 22ND AVE., #511		6.3 STREET	II.	•	-		
CITY-ST-ZIP	DELRAY BEACH FL 33445		6.4 CITY-S	r-ZIP LJ	elray Beach, FL 334	45		

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:

SUBJECTION OF FRANCE IN AME OF SIGNING OFFICER OR DIRECTOR

8/3/99

861-2785139 Daytime Phone # R2E037 (11/98)