³2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 28, 2005 8:00 am Secretary of State **DOCUMENT #747353** 04-28-2005 90199 022 ****61.25 SANDALFOOT SQUIRE PHASE II ASSOCIATION, INC. Principal Place of Business Mailing Address 14005029 9220 SW 3RD ST 7932 WILES ROAD BOCA RATON, FL 33428 CORAL SPRINGS, FL 33067 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04152005 Cha-NP CR2E037 (10/03) City & State City & State Applied For 59-2136375 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROBERT KAVE AND ASSOCIATES, PA 6261 NW 6 WAY, SUITE 103 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE, FL 33309 Zip Code City FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution Due by May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE Defete TITLE ☐ Change BADWAY, JOHN NAME NAME STREET ADDRESS 57 WELLSLEY AVE. STREET ADDRESS NORTH PROVIDENCE, RI 02911 CITY-ST-ZIP CITY-ST-ZIP TITLE DP DIRECTOR ☐ Change ☐ Delete TITLE Addition GRAHRM, CHARLES 4200 SW 3 ST FOSTER, KIM NAME NAME 4117 9200 SW 3 STREET, #107 STREET ADDRESS STREET ADDRESS BOCA RATON, FL 33428 CITY-ST-ZIP BOCA RATON FL 33428 CITY-ST-ZIP DV Delete DIRECTOR TITLE ☐ Change **Addition** TITLE MIKE PA NNILL. RUDEWICZ, STEPHEN NAME NAME 9280 SW 3 SHeet #806 STREET ADDRESS **9220 SW 3 STREET** STREET ADDRESS BOCA RATION FL CHY-S1-78 BOCA RATON, FL 33428 CITY-ST-7IP 33428 IIILE **■** Delete TITLE DIRECTOR Change Addition RAGONA, KEPRI PAVLIK, JOHN NAME NAME *915 13 HIGHVIEW ROAD 9220 SW 3 St STREET ADDRESS STREET ADDRESS **NEWTON, NJ 07860** CITY-ST-ZIP CITY-ST-ZIP BOCA RATION FL 33428 G Delete TITLE ☐ Change ■ Addition TITLE FERRERI, JEAN NAME NAME STREET ADDRESS 9280 SW 3RD ST #810 STREET ADDRESS BOCA RATON, FL 33428 CITY-ST-ZIP CITY - ST - ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

REDNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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