

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752025

FILED  
Feb 10, 2009  
Secretary of State

Entity Name: ISLE OF SANDALFOOT CONDOMINIUM, INC. 4

**Current Principal Place of Business:**

9235 SW 8 STREET  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

7932 WILES RD  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

FEI Number: 59-2266136      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROBERT KAYE AND ASSOCIATES INC  
6261 NW 6 MAY STE 103  
FORT LAUDERDALE, FL 33309      US

**Name and Address of New Registered Agent:**

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD  
C-207  
FORT LAUDERDALE, FL 33312 US

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.

SIGNATURE: CHARLES F. OTTO, ESQ.

02/10/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT      ( ) Delete  
Name: OCHRYMOWICZ, KOZ  
Address: 9235 SW 8TH ST. 306  
City-St-Zip: BOCA RATON, FL 33428

Title: VPS      ( ) Delete  
Name: GIGILLO, SUSAN  
Address: 9235 SW 8TH ST. 402  
City-St-Zip: BOCA RATON, FL 33428

Title: AVP      ( ) Delete  
Name: BALL, DAVID  
Address: 9235 SW 8TH ST 204  
City-St-Zip: BOCA RATON, FL 33428

Title: AT      ( ) Delete  
Name: ST. GERMAINE, JEAN PAUL  
Address: 9235 SW 8TH ST. 112  
City-St-Zip: BOCA RATON, FL 33428

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KOZ OCHRYMOWICZ

PT

02/10/2009

Electronic Signature of Signing Officer or Director

Date