

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90087 011 \*\*\*\*61.25

**DOCUMENT # N02000004730**

1. Entity Name  
**SAN SEBASTIAN HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
7100 W. CAMINO REAL, STE 117  
BOCA RATON, FL 33433

Mailing Address  
7100 W. CAMINO REAL, STE 117  
BOCA RATON, FL 33433

**40054716**



2. Principal Place of Business - No P.O. Box #  
**100 East Linton Blvd**

3. Mailing Address  
**100 East Linton Blvd**

Suite, Apt. #, etc.  
**#205A**

Suite, Apt. #, etc.  
**#205A**

03142007 Chg-NP CR2E037 (12/06)

City & State  
**Delray Beach FL**

City & State  
**Delray Beach FL**

4. FEI Number  
**02-0690338**

Applied For  
☐ Not Applicable

Zip  
**33483**

Country  
**USA**

Zip  
**33483**

Country  
**USA**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**VALYO, PAUL**  
7100 W. CAMINO REAL, STE 117  
BOCA RATON, FL 33433

## 7. Name and Address of New Registered Agent

Name **James M. O'Brien**  
Street Address (P.O. Box Number is Not Acceptable)  
**100 East Linton Blvd**  
**#205A**  
City **Delray Beach** **FL** Zip Code **33483**

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

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to**  
**Florida Department of State**

## 10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DORIA, RON 295 NE 5TH AVE #28 DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD METZ, BRENT D 295 NE 5TH AVE #27 DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SABIN, DAVID 290 NE 5TH AVE #18 DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Ron Doria 295 NE 5TH AVE. Delray Beach FL. 33483	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William DeBoc 290 NE 5TH AVE Delray Beach FL. 33483	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T David Sabin 290 NE 5TH AVE Delray Beach FL. 33483	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #