

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006679

FILED
Jul 07, 2006
Secretary of State

Entity Name: SANCTUARY CENTRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4800 NORTH FEDERAL HIGHWAY
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

4800 NORTH FEDERAL HIGHWAY
BOCA RATON, FL 33431

New Mailing Address:

999 WATERSIDE DRIVE
SUITE 2300
NORFOLK, VA 23510

FEI Number: 20-3928146 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVST () Delete
Name: BOCHMCKE, BRIAN
Address: 999 WATERSIDE DRIVE SUITE 2300
City-St-Zip: NORFOLK, VA 23510

Title: DP () Delete
Name: FRIEDMAN, ROBERT
Address: 999 WATERSIDE DRIVE SUITE 2300
City-St-Zip: NORFOLK, VA 23510

Title: DS () Delete
Name: SCHNEIDER, ARTHUR
Address: 4800 N FEDERAL HIGHWAY SUITE 105E
City-St-Zip: BOCA RATON, FL 33431

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT S. FRIEDMAN

DP

07/07/2006

Electronic Signature of Signing Officer or Director

Date