FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

Principal Place of Business

DOCUMENT # N14166

(5)

Mailing Address

SANDALWOOD AT BOYNTON BEACH HOMEOWNERS ASSOCIATI ON, INC.

P.O. BOX 3746 BOYNTON BEACH FL 33424	P.O. BOX 3746 BOYNTON BEACH FL 3342	24							
					3. Date Incorporated 04/03/198		3a. Date	of Las 3/23/1	
2. Principal Place of Business	2a. Mailing Address				4. FEI Number			77-	Applied For
21 220 CONGRESS PARK DRIVE	26 220 CONGRESS	PARK	DRTV	Æ	59-265606	34			Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.							\$8.7	5 Additional
22 SUITE 130	27 SUITE 130				Certificate of Stat	us Desired			Required
City & State	City & State				6. Election Campaig	n Financing		\$5 (00 May Be
23 DELRAY BEACH, FL	28 DELRAY BEACH	. FL			Trust Fund Contri				ed to Fees
Zip Country	Zip	Country			8. This corporation h	nas liability for in	itangible tax	under r	s. 199.032,
24 33445 25 USA		30 USA			Florida Statutes				
9. Name and Address of Currer	t Registered Agent		·		10. Name and Addr	ess of New Re	gistered Aç	jent	
		81	Name	е					
, GELFAND & ARPE, PA			Stree	t Addres	s (P.O. Box Number is	Not Acceptable))		
250 AUSTRALIAN AVE. S., SUITE 1010					,				
W. PALM BEACH FL 33401		83							
•		84	City					8 5 Z	Zip Code
							FL.		•
 Pursuant to the provisions of Sections 617.0502 or registered agent, or both, in the State of Flori 	and 617.1508, Florida Statutes,	the above-	named o	corporation	on submits this statem	ent for the purp	ose of chang	ati gniç	registered office
familiar with, and accept the obligations of, Sect	ion 617.0503, Florida Statu te s.	Dy a ko COIL	oranon	S DOBIU (or directors. Thereby a	ccept the appoi	nument as re	gistere	o agent. i am
SIGNATURE									
Signatum, typed or printed name of registered agent		Registered Age	it signature	e required wh			DATE		
12. OFFICERS ANI		13.		-1···	ADDITIONS/CHAP	NGE'S TO OFFIC			
NAME COLLINS, WILLIAM	▼ DELETE	1.1 TITLE		PD			LJ	Change	🔀 Addition
TAN BUTTALINABBLANE		1.2 NAME			KLUND, DALE	1 1779			
DOWNTON DOLLE		1.3 \$TREET		·	LIVE OAK LA				
TITLE TD	□ DELETE	1.4 CITY - S	T-ZIP	-	NTON BEACH,	FL			
NAME NASH, PATRICIA	Tiperese	2 1 TITLE		VD			LJ	Change	X Addition
103 1 H = 0.1/ 1.44 =		22 NAME			ZOSI, FRANK	*			
DOMESTALL DOLL DE		2 3 STREET			BUTTONWOOD				
TITLE VD	DELETE	2 4 CITY -: 3.1 TITLE	ST-ZIP		NTON BEACH,	FL		Obsession	F) Admir.
NAME SOROKA, ROBERT	Приси			D	OVA DODEDM		Κį	Change	neitibbA []
STREET ADDRESS 737 BUTTONWOOD LANE		3 2 NAME			OKA, ROBERT	* 43773			
CHY-SI-ZIP BOYNTON BCH. FL 33424		3.3 STREET			BUTTONWOOD				
TITLE D	k]deleje	3.4. CITY - : 4.1 TITLE	51-211	BUI.	NTON BEACH,	<u> </u>		Change	☐ Addition
NAME GANSER, TODD	AJocech	4. 2 NAME					لببا	Onange	☐ Addition
STREET ADDRESS 709 BUTTONWOOD LANE		4.3 STREET	ADDRESS	.					
CITY-ST-ZIP BOYNTON BCH FL				` 					
TITLE SD	DDELETE	4.4 CITY - S 5.1 TITLE	I- EIP	+			г т	Change	☐ Addition
NAME BARRY, JAMES		52 NAME		-			.	onange	L] Addition
STREET ADDRESS 121 BUTTONWOOD LANE		5.3 STREET	ADDOCCC	.					
CITY-ST-ZIP BOYNTON BCH FL		5.4 CITY-S		` 					
THLE	DELETE	6.1 TITLE	1.51	 				Change	Addition
NAME		6.2 NAME			8000	0178	349	8	LJ Flacition
STREET ADDRESS		6.3 STREET		. [-04/17/	960102	<u> 2033</u>	}	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

***61.25