2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2008 8:00 am
Secretary of State
02-28-2008 90003 037 ****61.25

DOCUMENT # N14166

1. Entity Name

SANDALWOOD AT BOYNTON BEACH HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
100 BUTTONWOOD LN BOYNTON BCH FL 33436 US	100 BUTTONWOOD LN BOYNTON BCH FL 33436 US

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2656064 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GULFSTREAM SERVICES MANAGEMENT 1375 GATEWAY BLVD. SUITE 28 BOYNTON BEACH FL 33426	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 Scott Strakeau Scott Strakeau 2/18/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CORREA, CLARAA 109 BUTTONWOOD LN BOYNTON BEACH FL 33436	☐ Delete	TITLE S NAME STREET ADDRESS CITY-ST-ZIP	S CORREA, CIARA	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ADAMS, EVELYN 116 LIVE OAK LANE BOYNTON BEACH FL 33436	☒ Delete	TITLE P NAME STREET ADDRESS CITY-ST-ZIP	P RICHARD KUPERMAN 745 BUTTONWOOD LN BOYNTON BEACH, FL 33436	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCOTT, LORRIE 752 BUTTONWOOD BOYNTON BCH FL 33436	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DICNISCI, CAROLYN 503 LIVE OAK LN BOYNTON BEACH FL 33436	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SALVATORE FALCHA 606 BUTTONWOOD LN BOYNTO	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP THOMAS, KANE JR 318 LIVE OAK LN BOYNTON BEACH FL 33436	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALLAN BORRELLI 719 BUTTONWOOD LN BOYNTON BEACH FL 33436	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: 2/16/08 561 732 6775