


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N34911</b>		
1. Entity Name SPORTLAND CONDOMINIUM ASSOCIATION, INC.		
Principal Place of Business 7777 GLADES ROAD SUITE 310 BOCA RATON, FL 33434 US	Mailing Address 7777 GLADES ROAD SUITE 310 BOCA RATON, FL 33434 US	



01032005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0186449	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  LOPEZ, KATHRYN A. 7777 GLADES ROAD, SUITE 310 BOCA RATON, FL 33434
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

U00000344229  
04/29/05-80129-002 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTDS LOPEZ, KATHRYN 7777 GLADES ROAD, S-310 BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP SCHMIER, ROBERT J 7777 GLADES ROAD, SUITE 310 BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FEURRING, DOUGLAS R 7777 GLADES ROAD, SUITE 310 BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:**  **April 28, 2005** **561-483-8400**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
**Robert J. Schmier, Pres.**