

FILE NOW: FILING FEE IS \$61.25

1

NONPROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra J. ...
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JUN 11 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N 96 00000 3289

1. Corporation Name

South Fla. Sabres, Inc.

Principal Place of Business

15385 Cedar Bluff Place
Wellington, Fla.
33414

Mailing Address

1041 Coral Drive
Boynton Beach, Fla 33426

3. Date Incorporated or Qualified

4/23/97 with Name change

4. FEI Number

65-0669308

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 15385 Cedar Bluff Place

Suite, Apt. #, etc.

22

City & State
Wellington, Fla

24 33414

Country

25 Palm Beach

2a. Mailing Address

26 1041 Coral Drive

Suite, Apt. #, etc.

27

City & State
Boynton Beach, Fla

29 33426

Country

30 P.B. County

9. Name and Address of Current Registered Agent

Ted Tavelacci, President
15385 Cedar Bluff
Wellington, Fla 33414

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0002 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title in signature

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE President
NAME Ted Tavelacci
STREET ADDRESS 15385 Cedar Bluff Place
CITY-ST-ZIP Wellington, Fla 33414

TITLE Vice President
NAME Ruth Ann Mendel
STREET ADDRESS 1041 Coral Drive
CITY-ST-ZIP Boynton Beach, Fla 33426

TITLE Treasurer
NAME Ruth Ann Mendel
STREET ADDRESS 1041 Coral Drive
CITY-ST-ZIP Boynton Beach, Fla 33426

TITLE Secretary
NAME Bev Snyder
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Secretary
1.2 NAME Sharon Tavelacci
1.3 STREET ADDRESS 15385 Cedar Bluff Place
1.4 CITY-ST-ZIP Wellington, Fla 33414

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: Ruth Ann Mendel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice Pres: Inaugures 561-735-4464

Date

Daytime Phone #

CR2E037 (10/97)

2

June 3, 1998

Annual Reports Filings
Division of Corporations
P.O. Box 6237
Tallahassee, Florida 32314

Re: South Florida Sabres, Inc.
Non-Profit Corporation
N96000003289

To Whom It May Concern:

Per my conversation with your office on May 29, 1998, I was informed that our Non-Profit Annual Report was sent to the wrong address on June 3, 1997. I hereby would request a reinstatement of this Non-Profit Corporation and would like the reinstatement fee waived. The person I spoke with was to note this on your records.

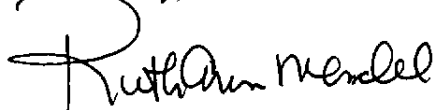
Thank you for your attention and cooperation in this manner. Attached is the Non-Profit Corporation Annual Report which was sent to me by your office last week to complete and I have requested a Certificate of Status. Enclosed is a check in the amount of \$131.25 (\$61.25 for 97, \$61.25 for 98 and \$8.75 for the certificate of status.

The addresss listed for the South Florida Sabres is 15385 Cedar Bluff, Wellington, Florida 33414 but send the requested information to our mailing addresss of:

1041 Coral Drive
Boynton Beach, Florida 33426

If there is a problem with anything regarding this matter, please contact me at 561-735-4464.

Sincerely,



Ruth Ann Mendel
Vice President and Treasurer for
the South Florida Sabres, Inc.