

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N29621

**Entity Name:** SANTA BARBARA PROPERTY OWNERS' ASSOCIATION, INC.

**FILED**  
**Jun 30, 2020**  
**Secretary of State**  
**9892798579CC**

**Current Principal Place of Business:**

3901 NORTH FEDERAL HIGHWAY  
SUITE 202  
BOCA RATON, FL 33431

**Current Mailing Address:**

3901 NORTH FEDERAL HIGHWAY  
SUITE 202  
BOCA RATON, FL 33431 US

**FEI Number: 65-0142119**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SCHNER, LARRY  
3901 NORTH FEDERAL HIGHWAY  
SUITE 202  
BOCA RATON, FL 33431 US

*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: LARRY SCHNER**

**06/30/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            EYLER, BONNIE  
Address        3901 NORTH FEDERAL HIGHWAY  
                 SUITE 202  
City-State-Zip: BOCA RATON FL 33431

Title            DIRECTOR  
Name            CARROTHERS, JACK  
Address        3901 NORTH FEDERAL HIGHWAY  
                 SUITE 202  
City-State-Zip: BOCA RATON FL 33431

Title            SECRETARY  
Name            MANDELL, LEONARD  
Address        3901 NORTH FEDERAL HIGHWAY  
                 SUITE 202  
City-State-Zip: BOCA RATON FL 33431

Title            VP  
Name            GERSHTEIN, MARIANNA  
Address        3901 NORTH FEDERAL HIGHWAY  
                 SUITE 202  
City-State-Zip: BOCA RATON FL 33431

Title            TREASURER  
Name            LEVY, JONATHAN  
Address        3901 NORTH FEDERAL HIGHWAY  
                 SUITE 202  
City-State-Zip: BOCA RATON FL 33431

*I hereby 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 all other like empowered.*

**SIGNATURE: BONNIE EYLER**

**PRESIDENT**

**06/30/2020**

Electronic Signature of Signing Officer/Director Detail

Date