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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 713846

1. Corporation Name

SABAL PALM GARDENS, INC.

Principal Place of Business

WESTMINSTER ROAD AND BROAD STREET
LEHIGH ACRES FL 33936-0145
US

Mailing Address

P. O. BOX 145
LEHIGH ACRES FL 33936
US



2. Principal Place of Business

21 **WESTMINSTER + BROAD ST**

Suite, Apt. #, etc.

22

City & State

23 **LEHIGH ACRES FL**

Zip

24 **33936**

Country

25 **US**

2a. Mailing Address

26 **P.O. BOX 145**

Suite, Apt. #, etc.

27

City & State

28 **LEHIGH ACRES FL**

Zip

29 **33936**

Country

30 **US**

3. Date Incorporated or Qualified

12/27/1967

4. FEI Number

59-1286627

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

9. Name and Address of Current Registered Agent

LINDIG, JOYCE
1131 BROAD STREET N.
LEHIGH ACRES FL 33936

10. Name and Address of New Registered Agent

81 Name **LINDIG, JOYCE**

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

1131 BROAD ST. N.

83

84 City **LEHIGH ACRES**

FL

85 Zip Code
33936

11. Pursuant to the provisions of Sections 617.0502 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

Joyce Lindig

JOYCE LINDIG 32-99

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	WILLIAMS, ELSIE	
STREET ADDRESS	1116 BROAD STREET N.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	VP	DELETE
NAME	LITWIN, RICHARD	
STREET ADDRESS	1104 BROAD STREET N.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	ST	DELETE
NAME	RICHARDS, FRANK	
STREET ADDRESS	1125 BROAD ST N	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	D	DELETE
NAME	LINDIG, JOYCE	
STREET ADDRESS	1131 BROAD STREET N.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	D	DELETE
NAME	REESE, EVELYN	
STREET ADDRESS	1108 BROAD STREET N.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	D	DELETE
NAME	SPANDLEY, MARY	
STREET ADDRESS	1111 BROAD STREET N	
CITY-ST-ZIP	LEHIGH ACRES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PAVIS JOE
1.3 STREET ADDRESS	1120 BROAD ST N
1.4 CITY-ST-ZIP	LEHIGH ACRES FL 33936
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	VP WILLIAMS ELSIE
2.3 STREET ADDRESS	1104 BROAD ST N.
2.4 CITY-ST-ZIP	LEHIGH ACRES FL, 33936
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ST RICHARDS, FRANK
3.3 STREET ADDRESS	1125 BROAD ST N
3.4 CITY-ST-ZIP	LEHIGH ACRES FL 33936
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	LINDIG JOYCE
4.3 STREET ADDRESS	1131 BROAD ST N.
4.4 CITY-ST-ZIP	LEHIGH ACRES FL 33936
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	D REESE, EVELYN
5.3 STREET ADDRESS	1108 BROAD ST. N.
5.4 CITY-ST-ZIP	LEHIGH ACRES FL 33936
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	D SPANDLEY, MARY
6.3 STREET ADDRESS	1111 BROAD ST N.
6.4 CITY-ST-ZIP	LEHIGH ACRES FL 33936

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *FRANK RICHARDS* **FRANK RICHARDS**

3/2/99

941-368-1257

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)