

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009552

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** THE VILLAGE AT SAILBOAT BEND CONDOMINIUM D ASSOCIATION, INC.

**Current Principal Place of Business:**

8190 STATE ROAD 84  
DAVIE, FL 33324

**New Principal Place of Business:**

1 FINANCIAL PLAZA  
SUITE 2001  
FT. LAUDERDALE, FL 33394

**Current Mailing Address:**

8190 STATE ROAD 84  
DAVIE, FL 33324

**New Mailing Address:**

1 FINANCIAL PLAZA  
SUITE 2001  
FT. LAUDERDALE, FL 33394

**FEI Number:** 20-2275282      **FEI Number Applied For** ( )      **FEI Number Not Applicable** ( )      **Certificate of Status Desired** ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PATRICIA KIMBALL FLETCHER, P.A.  
C/O DUANE MORRIS LLP  
200 SOUTH BISCAYNE BLVD STE 3400  
MIAMI, FL 33131 US

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

SENTINEL PROPERTY MANAGEMENT, LLC  
1 FINANCIAL PLAZA  
SUITE 2001  
FT. LAUDERDALE, FL 33394 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: AJ BELT, III

05/01/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: SCHRAGER, MARLENE  
Address: 8190 STATE ROAD 84  
City-St-Zip: DAVIE, FL 33324

Title: DVT ( ) Delete  
Name: BLAIR, GREG  
Address: 8190 STATE ROAD 84  
City-St-Zip: DAVIE, FL 33324

Title: DS ( ) Delete  
Name: VANESS, RICHARD  
Address: 8190 STATE ROAD 84  
City-St-Zip: DAVIE, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARLENE SCHRAGER

DP

05/01/2007

Electronic Signature of Signing Officer or Director

Date