

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002987

FILED  
Mar 23, 2009  
Secretary of State

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

**Current Principal Place of Business:**

1 FINANCIAL PLAZA  
SUITE 2001  
FT. LAUDERDALE, FL 33394

**New Principal Place of Business:**

**Current Mailing Address:**

1 FINANCIAL PLAZA  
SUITE 2001  
FT. LAUDERDALE, FL 33394

**New Mailing Address:**

FEI Number: 20-2563434      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SENTINEL PROPERTY MANAGEMENT, LLC  
1 FINANCIAL PLAZA  
SUITE 2001  
FT. LAUDERDALE, FL 33394 US

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

BURGESS, DAVID  
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: DAVID BURGESS      03/23/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: CLAUDIA, LUNG  
Address: 1211 SW 4TH ST.  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: DVT      ( ) Delete  
Name: AVRIL, NUE  
Address: 1304 SW. 4TH ST.  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: DS      ( ) Delete  
Name: PORTUONDO, ALBERT  
Address: 350 N. SHORE DR.  
City-St-Zip: DAVIE, FL

**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: DAVID BURGESS      RA      03/23/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date