

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 353640

FILED
Apr 24, 2009
Secretary of State

Entity Name: SAPPHIRE REAL ESTATE, INC.

Current Principal Place of Business:

9400 RIVER CROSSINGS BLVD
SUITE 104
NEW PORT RICHEY, FL 34655 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2108
ELFERS, FL 34680 US

New Mailing Address:

FEI Number: 22-1906107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, JOHN E.
9400 RIVER CROSSINGS BLVD
SUITE 104
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: SILVA, SUSAN
Address: 9400 RIVER CROSSING BLVD, STE 104
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: PD () Delete
Name: HUDSON, JOHN
Address: 9400 RIVER CROSSING BLVD, STE 104
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: HUDSON, JOHN E.
Address: 9400 RIVER CROSSING BLVD, STE 104
City-St-Zip: NEW PORT RICHEY, FL 34655

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN E. HUDSON

PD

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date