

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 27, 2008 8:00 am**  
**Secretary of State**

03-27-2008 90083 029 \*\*\*138.75

<b>DOCUMENT # L05000061984</b> 1. Entity Name <b>SAILFISH POINT REALTY LLC</b>					
Principal Place of Business <b>1648 SE SAILFISH POINT BOULEVARD</b> <b>STUART, FL 34996 US</b>			Mailing Address <b>1648 SE SAILFISH POINT BOULEVARD</b> <b>STUART, FL 34996 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.  City & State  Zip _____ Country _____		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip _____ Country _____			
03102008 Chg-LLC CR2E083 (12/06)				4. FEI Number <b>20-3048865</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>  <b>PRESENT, SUSAN</b> <b>1648 SE SAILFISH POINT BLVD</b> <b>STUART, FL 34996</b>			<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>		<b>Make check payable to</b> <b>Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BANK, JOSEPH 1648 SE SAILFISH POINT BLVD. STUART, FL 34996	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Debra Shah 1648 SE Sailfish Point Blvd. Stuart, FL 34996	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PRESENT, SUSAN 1648 SE SAILFISH POINT BLVD. STUART, FL 34996	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Karen Croce 1648 SE Sailfish Point Blvd. Stuart, FL 34996	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GOLDEN, ALAN 1648 SE SAILFISH POINT BLVD. STUART, FL 34996	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Maureen Crumbine 1648 SE Sailfish Point Blvd. Stuart, FL 34996	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GEISINGER, RICHARD 1648 SE SAILFISH POINT BLVD. STUART, FL 34996	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Edward Wax 1648 SE Sailfish Point Blvd. Stuart, FL 34996	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BALDINI, JAMES 1648 SE SAILFISH POINT BLVD. STUART, FL 34996	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PARLIN, GARY 1648 SE SAILFISH POINT BLVD. STUART, FL 34996	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					
<small>Date _____ Daytime Phone # _____</small>					

ATTACHMENT



*Sailfish Point®*

60017372  
#L05000061984

March 10, 2008

In regards to: Annual Report

Division of Corporations  
PO Box 6478  
Tallahassee, FL 32314

Dear Division of Corporations:

Enclosed please find the completed 2008 Limited Liability Company Annual Report for Sailfish Point Realty LLC.

I spoke with your office on 3/10/08 and asked why only 6 of my managing members were listed on the [www.sunbiz.org](http://www.sunbiz.org) website. I was told that the screen would only display 6 names.

I was told the best way to have a record that all of my managing members are registered with the state would be to request a copy of the annual report input sheet marked "Filed" by your office.

I have enclosed a copy of the 2008 Limited Liability Company Annual Report, and a self addressed stamped envelope. Would you be so kind as to place a copy stamped "Filed" into the mail for our records.

Thank you very much for your cooperation.

Respectfully,

Richard C. Geisinger, Jr.  
Managing Partner  
Sailfish Point Realty LLC

Enclosures (2)

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**Sailfish Point Realty LLC**

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[www.sailfishpoint.com](http://www.sailfishpoint.com)