

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002888

FILED
Jul 02, 2008
Secretary of State

Entity Name: SANCTUARY BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1401 FORUM WAY
SUITE 100
WEST PALM BEACH, FL 33401

New Principal Place of Business:

3500 SW CORPORATE PARKWAY
SUITE 203
PALM CITY, FL 34990

Current Mailing Address:

1401 FORUM WAY
SUITE 100
WEST PALM BEACH, FL 33401

New Mailing Address:

3500 SW CORPORATE PARKWAY
SUITE 203
PALM CITY, FL 34990

FEI Number: 65-1065760 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:

OLIVER, ANTHONY E
1401 FORUM WAY
SUITE 100
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

OLIVER, ANTHONY E
3500 SW CORPORATE PARKWAY
SUITE 203
PALM CITY, FL 34990 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: _____

07/02/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OLIVER, ANTHONY E
Address: 1401 FORUM WAY SUITE 100
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: WURSTER, ANITA
Address: 1401 FORUM WAY SUITE 100
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: OLIVER, NANCY G
Address: 1401 FORUM WAY SUITE 100
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OLIVER, ANTHONY E
Address: 3500 SW CORPORATE PARKWAY, SUITE 203
City-St-Zip: PALM CITY, FL 34990

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

Title: D (X) Change () Addition
Name: OLIVER, NANCY G
Address: 3500 SW CORPORATE PARKWAY, SUITE 203
City-St-Zip: PALM CITY, FL 34990

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: ANTHONY E OLIVER

D

07/02/2008

Electronic Signature of Signing Officer or Director

Date