2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002888

FILED Apr 15, 2009 Secretary of State

Entity Name: SANCTUARY BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3500 SW CORPORATE PARKWAY 500 AUSTRALIAN AVE

SUITE 203 SUITE 710

PALM CITY, FL 34990 WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

3500 SW CORPORATE PARKWAY 500 AUSTRALIAN AVE

SUITE 203 SUITE 710

PALM CITY, FL 34990 WEST PALM BEACH, FL 33401

FEI Number: 65-1065760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

OLIVER, ANTHONY E KAHLERT, HERBERT F 3500 SW CORPORATE PARKWAY 500 AUSTRALIAN AVE

SUITE 203 SUITE 710

PALM CITY, FL 34990 US WEST PALM BEACH, FL 33401 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: HERBERT F. KAHLERT 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANG

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: D (X) Change () Addition

Name: OLIVER, ANTHONY E Name: KAHLERT, HERBERT F
Address: 3500 SW CORPORATE PARKWAY, SUITE 203 Address: 500 AUSTRALIAN AVE

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: WEST PALM BEAHC, FL 33401

Title: D () Delete Title: D (X) Change () Addition Name: WURSTER, ANITA Name: SWAN, ROBERT

Address: 1401 FORUM WAY SUITE 100 Address: 337 OLD JUPITER BEACH ROAD

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: JUPITER, FL 33477

Title: D () Delete Title: D (X) Change () Addition Name: OLIVER, NANCY G Name: OLIVER, ED

Address: 3500 SW CORPORATE PARKWAY, SUITE 203 Address: 3500 SW CORPORATE PARKWAY, SUITE 203

 City-St-Zip:
 PALM CITY, FL 34990
 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: HERBERT F. KAHLERT D 04/15/2009