2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N02000002557

Entity Name: SAUSALITO GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

814 S.E. 13TH STREET
#2
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

USA SERVICES
6915 TAFT ST
HOLLYWOOD, FL 33024

New Mailing Address:

814 SE 13 ST
#2
FORT LAUDERDALE, FL 33316

FEI Number: 38-3648352 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAPIRO, PAUL
USA SERVICES
6915 TAFT STREET
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

THOMAS, SHARON
814 SE 13 ST
#2
FORT LAUDERDALE, FL 33316 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: SHARON THOMAS 04/30/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BRUSKIN, JEFF
Address: 814 SE 13TH ST, #6
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VPD ( ) Delete
Name: SCHALKWIJK, YAN
Address: 1007 N. FEDERAL HIGHWAY #218
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: SD ( ) Delete
Name: HILTON, ADAM
Address: 814 SE 13TH ST, #2
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition
Name: THOMAS, SHARON
Address: 814 SE 13TH ST, #2
City-St-Zip: FORT LAUDERDALE, FL 33316

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: SHARON THOMAS SD 04/30/2007
Electronic Signature of Signing Officer or Director — Date