2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002557

FILED Jan 09, 2008 Secretary of State

Entity Name: SAUSALITO GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	3TH STREET			
#2 FORT LAU	JDERDALE, F	L 33316		
Current Mailing Address:		New Mailing Address:		
314 SE 13 #2	ST			
	JDERDALE, F	L 33316		
FEI Number	: 38-3648352	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of (Current Registered Agent:	Name and Address o	of New Registered Agent:
THOMAS, 314 SE 13	SHARON			
# 2	JDERDALE, F	L 33316 US		
#2 FORT LAU The above	JDERDALE, F		purpose of changing its registered	d office or registered agent, or both,
#2 FORT LAU The above	JDERDALE, F named entity e of Florida.		purpose of changing its registered	d office or registered agent, or both,
#2 FORT LAU The above n the State	JDERDALE, F named entity of Florida. RE:			d office or registered agent, or both, Date
#2 FORT LAU The above n the State SIGNATUI	JDERDALE, F named entity of Florida. RE:	submits this statement for the	ent	
#2 FORT LAU The above In the State SIGNATUI OFFICER Fitle: Name: Address: Dity-St-Zip:	JDERDALE, F e named entity e of Florida. RE: Electron S AND DIREC PD (BRUSKIN, JEF 814 SE 13TH S FORT LAUDER	submits this statement for the nic Signature of Registered Age TORS:) Delete F ST, #6 RDALE, FL 33316	ent ADDITIONS/CHANGE Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition
#2 FORT LAU The above In the State SIGNATUI OFFICER Ittle: Name: Address:	DDERDALE, F e named entity e of Florida. RE: Electron S AND DIREC PD (BRUSKIN, JEF 814 SE 13TH S FORT LAUDER VPD (SCHALKWIJK, 1007 N. FEDEI	submits this statement for the nic Signature of Registered Agerones: Delete F ST, #6 RDALE, FL 33316	ent ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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 01/09/2008