

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009028

FILED
Mar 31, 2009
Secretary of State

Entity Name: SAPPHIRE COVE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

PHOENIX MGMT
3082 JOG RD
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

3082 JOG RD
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 01-0770179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENTHAL, DAVID C
C/O PHOENIX MGMT
3082 JOG RD
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: LEVINE, MARVIN
Address: 2270 SAPPHIRE CIRCLE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: PD () Delete
Name: CARDARELLI, DOLORIS
Address: 2220 SAPPHIRE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VPD () Delete
Name: LAUKAITIS, ELEANOR
Address: 2260 SAPPHIRE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: DOLORES CARDARELLI

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date