2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2008
Secretary of State

DOCUMENT# N04000000027

Entity Name: SAPIHA, INC.

Current Principal Place of Business:

946 PRITCHARD ISLAND RD
INVERNESS, FL 34450

New Principal Place of Business:

Current Mailing Address:

946 PRITCHARD ISLAND RD
INVERNESS, FL 34450

New Mailing Address:

FEI Number: 13-4292263 **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:

GRUBMAN, AL
946 PRITCHARD ISLAND RD
INVERNESS, FL 34450 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: DP ( ) Delete
Name: GRUBMAN, AL
Address: 946 PRITCHARD ISLAND RD
City-St-Zip: INVERNESS, FL 34450

Title: DV ( ) Delete
Name: SIEFERT, JOHN
Address: 1032 PRITCHARD ISLAND RD
City-St-Zip: INVERNESS, FL 34450

Title: DST ( ) Delete
Name: GUMBEL, SAM
Address: 9420 E SOUTHGATE DRIVE
City-St-Zip: INVERNESS, FL 34450

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change ( ) Addition
Name: GUMBEL, SAM
Address: 9420 E SOUTHGATE DRIVE
City-St-Zip: INVERNESS, FL 34450

Title: DS ( ) Change (X) Addition
Name: EVENSON, SUE
Address: 964 PRITCHARD ISLAND RD
City-St-Zip: INVERNESS, FL 34450

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: AL GRUBMAN DP 05/17/2008

Electronic Signature of Signing Officer or Director — Date