2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003479

Entity Name: SAGE CONDOMINIUM ASSOCIATION, INC.

FILED Apr 19, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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2185 N.E. 123RD ST. NORTH MIAMI, FL 33181

Current Mailing Address: New Mailing Address:

309 23RD STREET #300 MIAMI BEACH, FL 33139

FEI Number: 20-1506037 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:

REGATTA REAL ESTATE MANAGMENT 309 23RD STREET #300 MIAMI BEACH, FL 33139 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ROMO, ELOY
 Name:
 ROMO, ELOY

 Address:
 2185 N.E. 123RD ST.
 Address:
 2185 N.E. 123RD ST.

 City-St-Zip:
 NORTH MIAMI, FL 33181
 City-St-Zip:
 NORTH MIAMI, FL 33181

Title: Title: (X) Change () Addition () Delete Name: TESMOND, JOSEPH Name: TESMOND, JOSEPH Address: 2185 N.E. 123RD ST. Address: 2185 N.E. 123RD ST. City-St-Zip: NORTH MIAMI, FL 33181 City-St-Zip: NORTH MIAMI, FL 33181

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

 Name:
 ALEMAN, BEATRIZ
 Name:
 ALEMAN, BEATRIZ

 Address:
 2185 N.E. 123RD ST.
 Address:
 2185 N.E. 123RD ST.

 City-St-Zip:
 NORTH MIAMI, FL 33181
 City-St-Zip:
 NORTH MIAMI, FL 33181

I hereby certify that the information supplied with this filing does not qualify for the 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: ELOY ROMO PD 04/19/2006