


2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N05000004202

1. Entity Name
SAILBOAT POINTE CONDOMINIUM ASSOCIATION, INC.



FILED
06 SEP 26 PM 3:46
CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2325 NW 33RD ST
FT LAUDERDALE, FL 33309

Mailing Address
2325NW 33RD ST
FT LAUDERDALE, FL 33309



2. Principal Place of Business
2325 NW 33rd St.

3. Mailing Address
2325 NW 33rd St.

09132006 Chg-NP CR2E037 (4/06)

4. FEI Number
20-3031097

Applied For
 Not Applicable

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale, FL

Zip Country
33309 US

Zip Country
33309 US

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KATZMAN & KORR, P.A.
1501 NORTHWEST 49TH STREET - SUITE 202
FORT LAUDERDALE, FL 33309

7. Name and Address of New Registered Agent

Name *Rhonda Hollander, P.A.*

Street Address (P.O. Box Number is Not Acceptable)
323 SW 1st Ave

City *Dania Bch* FL Zip Code *33004*

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *R Hollander* DATE *9/20/06*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES EBBEN-ROSS, JULIAN 2325 NW 33 ST FT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RIVEIRO, IVO 2325 NW 33ST FT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC RUTAN, JOHN 2325 NW 33ST FT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR FRIEDMAN, ROBIN 2325 NW 33 ST FT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR O'HAY, JAMES 2325 NW 33 ST FT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>T. Brinkman, Grace</i> 2609 NW 33 St. # 2113 Ft. Lauderdale, FL 33309	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>DIR</i> <i>Antini, Nicole</i> 2351 NW 33 St. # 513 Ft. Lauderdale, FL 33309	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	800080183788 09/26/06--01051--001 **\$1.25	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>TS 9/20</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Grace Brinkman* *Traswer* DATE *9/20/06* DAYTIME PHONE # *954-232-4334*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR