

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Dec 20, 2012  
Secretary of State**

DOCUMENT# N05000004202

**Entity Name:** SAILBOAT POINTE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2325 NW 33RD ST.  
FORT LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

2325 NW 33RD ST.  
OAKLAND PARK, FL 33309 US

**Current Mailing Address:**

2325 NW 33RD ST.  
FORT LAUDERDALE, FL 33309 US

**New Mailing Address:**

**FEI Number:** 20-3031097      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCOTT, TRIPP P.A.  
110 SE 6TH STREET  
15TH FLOOR  
FORT LAUDERDALE, FL 33301 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:** P  
**Name:** CREAMER, KELLY  
**Address:** 2667 NW 33RD ST #2408  
**City-St-Zip:** OAKLAND PARK, FL 33309

**Title:** VP  
**Name:** BRINKMAN, GRACE  
**Address:** 2607 NW 33RD ST #2113  
**City-St-Zip:** OAKLAND PARK, FL 33309

**Title:** T/S  
**Name:** HUBBARD, WAYNE  
**Address:** 2420 NW 33RD ST #1007  
**City-St-Zip:** OAKLAND PARK, FL 33309

**Title:** D  
**Name:** RIVEIRO, IVO  
**Address:** 10390 SW 62 STREET  
**City-St-Zip:** MIAMI, FL 33309

I hereby 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 all other like empowered.

SIGNATURE: KELLY CREAMER

P

12/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date