

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90058 027 ****61.25

DOCUMENT # N21062	
1. Entity Name SAIL HARBOR PROPERTY OWNERS' ASSOCIATION, INC.	

Principal Place of Business 1384 SAIL HARBOR CIR TARPON SPRINGS, FL 34689 US	Mailing Address 1384 SAIL HARBOR CIR TARPON SPRINGS, FL 34689 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address Premier Comm. Consult.
Suite, Apt. #, etc.	Suite, Apt. #, etc. 18215 Branch Rd
City & State Hudson FL	City & State
Zip 34667	Country



01242007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2813388	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CIANFRONE, JOSEPH R PA 1964 BAYSHORE BLVD DUNEDIN, FL 34698	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ENNIS, BERLIS F ☐ Delete 1384 SAIL HARBOR CIR TARPON SPRINGS, FL 34689	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Delete GLENN, HAMBURG 1580 MARY LN TARPON SPRINGS, FL 34689	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP ☐ Change ☒ Addition Meredith Cadwallader 1401 Sail Harbor Circle Tarpon Springs FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ☐ Delete TSOTSOS, TERESA J 1422 SAIL HARBOR CIRCLE TARPON SPRINGS, FL 34689	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ☐ Delete OFFERMAN, JOSEPH 1576 MARY LN TARPON SPRINGS, FL 34689	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ☐ Change ☒ Addition Vicki Anderson 1517 Mary Lane Tarpon Springs FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: Joseph Offerman Joseph Offerman 727 868 8680
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #