

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43703

FILED
Apr 23, 2009
Secretary of State

Entity Name: SAPPHIRE LAKES MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2685 HORSESHOE DR . S
215
NAPLES, FL 34104 US

Current Mailing Address:

2685 HORSESHOE DR . S
215
NAPLES, FL 34104 US

New Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH #215
NAPLES, FL 34104 US

New Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH #215
NAPLES, FL 34104 US

FEI Number: 65-0273226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESHAW, IRWIN
218 GABRIEL CIR. #5
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

LESHAW, IRWIN
218 GABRIEL CIRCLE #5
NAPLES, FL 34104 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: IRWIN LESHAW

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MEARS, REGINALD
Address: 550 GABRIEL CIR SUITE 2
City-St-Zip: NAPLES, FL 34104

Title: DVP () Delete
Name: LESHAW, IRWIN
Address: 218 GABRIEL CIR #5
City-St-Zip: NAPLES, FL 34104

Title: T () Delete
Name: VANSTONE, GARY
Address: 542 JOSEPH CT SUITE 01
City-St-Zip: NAPLES, FL 34104

Title: S () Delete
Name: VELLA, MARIAN
Address: 217 GABRIEL CIR SUITE 2809
City-St-Zip: NAPLES, FL 34104

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MEARS, REGINALD
Address: 550 GABRIEL CIRCLE #2
City-St-Zip: NAPLES, FL 34104

Title: D (X) Change () Addition
Name: LESHAW, IRWIN
Address: 218 GABRIEL CIRCLE #5
City-St-Zip: NAPLES, FL 34104

Title: T (X) Change () Addition
Name: VANSTONE, GARY
Address: 542 JOSEPH COURT #1
City-St-Zip: NAPLES, FL 34104

Title: S (X) Change () Addition
Name: VELLA, MARIAN
Address: 217 GABRIEL CIRCLE #2809
City-St-Zip: NAPLES, FL 34104

Title: P () Change (X) Addition
Name: FOSTER, ROBERT
Address: 380 GABRIEL CIRCLE #12
City-St-Zip: NAPLES, FL 34104

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: IRWIN LESHAW

D

04/23/2009

Electronic Signature of Signing Officer or Director

Date