2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45587

FILED Apr 23, 2009 Secretary of State

Entity Name: TOPAZ AT SAPHIRE LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2685 HORSESHOE DR S C/O RESORT MANAGEMENT

2685 HORSESHOE DRIVE SOUTH STE 215 215 NAPLES, FL 34104

NAPLES, FL 34104

New Mailing Address: **Current Mailing Address:**

C/O RESORT MANAGEMENT 2685 HORSESHOE DR S

2685 HORSESHOE DRIVE SOUTH STE 215 NAPLES, FL 34104

NAPLES, FL 34104 US

FEI Number: 59-3120778 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:

CHAPIN, FLOYD 228 BELINA DRIVE #612 NAPLES, FL 34104

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:

() Delete (X) Change () Addition

MARKLE, RALPH MARKLE, RALPH Name: Name: 228 BELINA DR #605 Address: 228 BELINA DRIVE #605 Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104

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

SCHMITT, FRED Name: SCHMITT, FREDRICK Name: Address: 260 BELINA DR #709 Address: 260 BELINA DRIVE #709 City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104

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

CHAPIN, FLOYD CHAPIN, FLOYD Name: Name: 228 BELINA DR #612 228 BELINA DRIVE #612 Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104

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

DELVENTHAL, JOHN Name: DELVENTHAL, JOHN Name: 324 BELINA DR #901 324 BELINA DRIVE #911 Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104

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

SAFFORD, PHYLLIS SAFFORD, PHYLLIS Name: Name: 324 BELINA DR #911 324 BELINA DRIVE #911 Address: Address: City-St-Zip: NAPLES, FL 34104 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: FLOYD CHAPIN Ρ 04/23/2009