

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 16, 2009**  
**Secretary of State**

DOCUMENT# N93000003608

**Entity Name:** SAILBOAT CAY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**13499 BISCAYNE BLVD.  
# CU-219  
NORTH MIAMI, FL 33181**New Principal Place of Business:****Current Mailing Address:**13499 BISCAYNE BLVD.  
# CU-219  
NORTH MIAMI, FL 33181**New Mailing Address:****FEI Number:** 65-0418884      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**KATZMAN GARFINKEL, P.A.  
1501 NW 49 ST.  
SUITE 202  
FORT LAUDERDALE, FL 33309 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      ( ) Delete  
**Name:** SANTIAGO, LINDA  
**Address:** 13499 BISCAYNE BLVD.  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:** T      ( ) Delete  
**Name:** GAMBETTA, IFF  
**Address:** 13499 BISCAYNE BLVD.  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:** V      ( ) Delete  
**Name:** ORTEGA, GUS  
**Address:** 13499 BISCAYNE BLVD.  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:** S      ( ) Delete  
**Name:** FIORE, TONY  
**Address:** 13499 BISCAYNE BLVD  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P      (X) Change ( ) Addition  
**Name:** SANTIAGO, LINDA  
**Address:** 13499 BISCAYNE BLVD. 610  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:** T      (X) Change ( ) Addition  
**Name:** DHUPELIA, BHAVIN A  
**Address:** 13499 BISCAYNE BLVD. 1201  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:** V      (X) Change ( ) Addition  
**Name:** ORTEGA, GUS  
**Address:** 13499 BISCAYNE BLVD. 602  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:** S      (X) Change ( ) Addition  
**Name:** ARESO, CARMELO  
**Address:** 13499 BISCAYNE BLVD 605  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:** D      ( ) Change (X) Addition  
**Name:** TREADWAY, THOMAS  
**Address:** 13499 BISCAYNE BLVD. 406  
**City-St-Zip:** NORTH MIAMI, FL 33181**Title:** D      ( ) Change (X) Addition  
**Name:** FREDRIKSSON, PETER  
**Address:** 13499 BISCAYNE BLVD. 614  
**City-St-Zip:** HIALEAH, FL 33181

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: LINDA SANTIAGO

P

09/16/2009

Electronic Signature of Signing Officer or Director

Date