2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000226

FILED Feb 29, 2012 Secretary of State

Entity Name: SANCTUARY PBG HOMEOWNERS ASSOCIATION, INC.

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

8259 N. MILITARY TRAIL 4227 NORTHLAKE BOULEVARD STE 11 PALM BEACH GARDENS, FL 33410

PALM BEACH GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

8259 N. MILITARY TRAIL 4227 NORTHLAKE BOULEVARD PALM BEACH GARDENS, FL 33410

PALM BEACH GARDENS, FL 33410

FEI Number: 65-0465684 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:

SEA BREEZE CMS, INC
8259 N. MILITARY TRAIL
STE 11
SEA BREEZE CMS, INC
4227 NORTHLAKE BOULEVARD
PALM BEACH GARDENS, FL 33410 US

PALM BEACH GARDENS, FL 33410 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: 02/29/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: ROSENKRANZ, HOWARD
Address: 4227 NORTHLAKE BOULEVARD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SD

Name: PURCELL, CAROL

Address: 4227 NORTHLAKE BOULEVARD City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VPD

Name: SPANKS, WILLIAM

Address: 4227 NORTHLAKE BOULEVARD City-St-Zip: PALM BEACH GARDENS, FL 33410

Title:

Name: HEARN, JOY

Address: 4227 NORTHLAKE BOULEVARD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD

Name: MAROUSSES, JOHN

Address: 4227 NORTHLAKE BOULEVARD City-St-Zip: PALM BCH GDNS, FL 33410

Title: D

Name: NUTT, JIM

Address: 4227 NORTHLAKE BOULEVARD City-St-Zip: PALM BCH GDNS, FL 33410

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: HOWARD ROSENKRANZ PRES 02/29/2012