2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400003283

FILED Apr 19, 2010 Secretary of State

Entity Name: SAPPHIRE BAY RECREATION ASSOCIATION, INC.

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

% PINES PROPERTY MGMT 19620 PINES BLVD, STE 205 PEMBROKE PINES, FL 33029 US

Current Mailing Address: New Mailing Address:

% PINES PROPERTY MGMT P.O. BOX 820100 SO FLORIDA, FL 330820100 US

FEI Number: 65-0549336 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:

STEVENS & GOLDWYN, P.A.
2 SOUTH UNIVERSITY DR. #210
PLANTATION, FL 33324 US

STEVENS & GOLDWYN, P.A.
2 SOUTH UNIVERSITY DR.
315
PLANTATION, FL 33324 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: 04/19/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: RIVERA-CUSSELL, CATHI Address: 1871 SW 176 AVE City-St-Zip: MIRAMAR, FL 33029 US

 Title:
 TD

 Name:
 REYES, ANA

 Address:
 1911 SW 176 AVE

 City-St-Zip:
 MIRAMAR, FL 33029 US

Title: VP

Name: MCCOMMON, KATHRYN Address: 17607 SW 20 ST City-St-Zip: MIRAMAR, FL 33029 US

Title: SD

 Name:
 BRUNNER, SYLVIE

 Address:
 1896 SW 177 TERR

 City-St-Zip:
 MIRAMAR, FL 33029 US

Title:

 Name:
 IBERN, FRANCISCO

 Address:
 17628 SW 20 ST

 City-St-Zip:
 MIRAMAR, FL 33029 US

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: KATHRYN MCCOMMON VP 04/19/2010