2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005796

FILED Apr 15, 2011 Secretary of State

Entity Name: JADE CLUB AT SAPPHIRE LAKES CONDOMINIUM ASSOCIATION, INC.

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

C/O RESORT MANAGEMENT 2685 HORSESHOE DR S #215 NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

C/O RESORT MANAGEMENT 2685 HORSESHOE DR S #215 NAPLES, FL 34104

FEI Number: 65-0581132 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:

FOSTER, ROBERT
380 CABRIEL CIRCLE #12
NAPLES, FL 34104 US
LAW OFFICE OF JAMIE GREUSEL
1104 N. COLLIER BLVD.
MARCO ISLAND, FL 34145 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: JAMIE GREUSEL 04/15/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP

Name: KRIEGER, CARL
Address: 380 GABRIEL CIRCLE 5
City-St-Zip: NAPLES, FL 34104

Title: T

Name: WELCH, JUNE

Address: 380 CABRIEL CIRCLE #107 City-St-Zip: NAPLES, FL 34104

Title: S

 Name:
 FLYNN, THOMAS

 Address:
 380 CABRIEL CIRCLE #11

 City-St-Zip:
 NAPLES, FL 34104

Title: [

Name: FOGEL, KEITH

Address: 380 GABRIEL CIRCLE # 11 City-St-Zip: NAPLES, FL 34104

Title: F

 Name:
 FOSTER, ROBERT

 Address:
 380 GABRIEL CIRCLE #12

 City-St-Zip:
 NAPLES, FL 34104

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: ROBERT FOSTER P 04/15/2011