

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002750

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: SAPPHIRE SOUND RECREATION ASSOCIATION, INC.

## Current Principal Place of Business:

C/O PINES PROPERTY MGT.  
19620 PINES BLVD, STE 205  
PEMBROKE PINES, FL 33029 US

## New Principal Place of Business:

## Current Mailing Address:

C/O PINES PROPERTY MGMT  
P.O. BOX 820100  
SO. FLORIDA, FL 330820100

## New Mailing Address:

FEI Number: 65-0681792      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEVENS & GOLDWYN, P.A.  
2 SOUTH UNIVERSITY DR  
# 210  
PLANTATION, FL 33324 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: OSWALDO, GOMEZ  
Address: 17957 SW 30 CT.  
City-St-Zip: HOLLYWOOD, FL 33029

Title: DVP ( ) Delete  
Name: RIVAS, GERARDO  
Address: 2941 SW 179 AVE  
City-St-Zip: MIRAMAR, FL 33029

Title: T ( ) Delete  
Name: GONZALEZ, ROBERTO  
Address: 17997 SW 30 ST.  
City-St-Zip: MIRAMAR, FL 33029

Title: DVP (X) Delete  
Name: RIVERA, GARY  
Address: 17945 SW 29 CT  
City-St-Zip: MIRAMAR, FL 33029

Title: DS (X) Delete  
Name: FLOYD, MARIA  
Address: 2951 SW 179 AVE  
City-St-Zip: MIRAMAR, FL 33029

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CEPEDA, BRENDA  
Address: 3067 SW 179 AVE.  
City-St-Zip: MIRAMAR, FL 33029

Title: DVP (X) Change ( ) Addition  
Name: RIVERA, GARY  
Address: 17945 SW 29 CT  
City-St-Zip: MIRAMAR, FL 33029

Title: S (X) Change ( ) Addition  
Name: GUYTON, ALEXANDRA  
Address: 2911 SW 179 AVE  
City-St-Zip: MIRAMAR, FL 33029

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BRENDA CEPEDA

DP

04/24/2009

Electronic Signature of Signing Officer or Director

Date