2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005438

Apr 27, 2009 Secretary of State

Entity Name: SAPPHIRE SHORES RECREATION ASSOCIATION, INC.

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

19620 PINES BLVD, STE 205 PEMBROKE PINES, FL 33029 US

Current Mailing Address: New Mailing Address:

C/O PINES PROPERTY MGT. P.O. BOX 820100 SO. FLORIDA, FL 33082

FEI Number: 65-0681794 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 DRIVE #210 PLANTATION, FL 33324

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete DAMONTE, AUELINA DAMONTE, AVELINA Name: Name:

17321 SW 18TH ST Address: 17321 SW 18TH ST Address: MIRAMAR, FL 33029 City-St-Zip: City-St-Zip: MIRAMAR, FL 33029

Title: VD () Delete Title: (X) Change () Addition INFANTE, JORGE Name: INFANTE, JORGE Name:

Address: 17419 SW 21 CT Address: 17419 SW 21 CT City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: MIRAMAR, FL 33029

Title: () Delete Title: (X) Change () Addition

RUEGER, ANNA RUEGER, ANA Name: Name: 1828 SW 175 AVE. Address: 1828 SW-175 AVE Address: City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: MIRAMAR, FL 33029

Title: () Delete Title: (X) Change () Addition

Name: VERA, RICHARD Name: VERA, RICHARD Address: 17418 SW 20 ET Address: 17418 SW 20 CT City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: MIRAMAR, FL 33029

Title: () Delete Title: (X) Change () Addition

GONZALEZ DEL VALLE, MANUEL FELTGEN, DENNIS Name: Name: 17392 SW 21 CT 17341 SW 18 ST Address: Address: MIRAMAR, FL 33029 City-St-Zip: MIRAMAR, FL 33029 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: AVELINA DAMONTE Ρ 04/27/2009