

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2003 8:00 am
Secretary of State

01-17-2003 90079 005 ****61.25

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1. Entity Name

SAPPHIRE SHORES RECREATION ASSOCIATION, INC.



Principal Place of Business

**C/O PINES PROPERTY MGT.
17794 SW 2ND ST
PEMBROKE PINES FL 33029
US**

Mailing Address

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0681794**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**EVANS, THOMAS R JR.
C/O PINES PROPERTY MGT.
17794 SW 2ND ST
PEMBROKE PINES FL 33029**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FONSECA, JUAN CARLOS 1988 SW 175 AVE MIRAMAR FL 33029	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DARNEL GORDON 17377 SW 22 CT MIRAMAR, FL 33029	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANCHEZ, JAVIER 2243 SW 173RD AVE MIRAMAR FL 33029	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, LUIS A 17303 SW 22 ST MIRAMAR FL 33029	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SAME	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FLINCHUM, ANA 1958 SW 175TH AVE MIRAMAR FL 33029	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BEATRIZ MENDOZA 17431 SW 18 STREET MIRAMAR, FL 33029	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORTIZ, CHRISTIAN 17445 SW 20 ST MIRAMAR FL 33029	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAVIER A. SANCHEZ
PRESIDENT

1/9/03 829-5666