2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002854

FILED Jan 16, 2008 Secretary of State

Entity Name: SAIL HARBOUR CONDOMINIUM ASSOCIATION, INC.

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

4914 TUDOR DRIVE 4914 TUDOR DRIVE CAPE CORAL, FL 33904

CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

4914 TUDOR DRIVE #101 CAPE CORAL, FL 33904

FEI Number: 65-0194158 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:

GAAR, SHAN A GAAR, ALEDA 4914 TUDOR DRIVE #101 5125 AVALON DR

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33904 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: ALEDA GAAR, AGENT 01/16/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GAAR, SHAN
 Name:
 O'KEEFE, JOHN

 Address:
 4914 TUDOR DRIVE #101
 Address:
 4914 TUDOR DRIVE #203

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 CAPE CORAL, FL 33904

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

 Name:
 O'KEEFE, KEN
 Name:
 JOHNSTON, SCOTT

 Address:
 4914 TUDOR DRIVE #203
 Address:
 4914 TUDOR DRIVE #201

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 CAPE CORAL, FL 33904

Title: SD () Delete Title: () Change () Addition

 Name:
 O'KEEFE, CARA
 Name:

 Address:
 4914 TUDOR DRIVE #203
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:

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

 Name:
 GAAR, ALEDA
 Name:
 O'KEEFE, CARA

 Address:
 4914 TUDOR DRIVE #101
 Address:
 4914 TUDOR DRIVE #203

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 CAPE CORAL, FL 33904

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: JOHN O'KEEFE PD 01/16/2008