

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90045 018 ****61.25

DOCUMENT # N96000004486	
1. Entity Name	
SAPPHIRE POINTE RECREATION ASSOCIATION, INC.	

Principal Place of Business	Mailing Address
C/O PINES PROPERTY MGT. 19620 PINES BLVD, STE 205 PEMBROKE PINES FL 33229 US	C/O PINES PROPERTY MGT. PO BOX 820100 SO. FLORIDA FL 33082 US



2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E037 (10/06)

City & State	City & State
Zip	Country

4. FEI Number	Applied For
65-0711313	Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
EVANS, THOMAS R JR. C/O PINES PROPERTY MGT. 19620 PINES BLVD, STE 205 PEMBROKE PINES FL 33029

7. Name and Address of New Registered Agent
Name ROBERT KAYE ASSOCIATES, P.A.
Street Address (P.O. Box Number is Not Acceptable) 6261 NW 6TH WAY
SUITE 103
City FT. LAUDERDALE FL Zip Code 33309

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 <i>Thomas Evans President</i>	DATE 4-13-07
(NOTE: Registered Agent signature required when reinstating)	

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	VP
NAME	TARRIO, JOSE
STREET ADDRESS	3163 SW 176 TER
CITY - ST - ZIP	MIRAMAR FL 33029
TITLE	D
NAME	MATHIS, DENISE
STREET ADDRESS	17647 SW 32 ST
CITY - ST - ZIP	MIRIMAR FL 33029
TITLE	D
NAME	ALLISON, CAROL
STREET ADDRESS	3136 SW 176 TERRACE
CITY - ST - ZIP	MIRAMAR FL 33029
TITLE	P
NAME	IKE, CHRISTIAN
STREET ADDRESS	17602 SW 32 ST
CITY - ST - ZIP	MIRAMAR FL 33029
TITLE	ST
NAME	CARTER, DOREEN
STREET ADDRESS	17668 SW 31 COURT
CITY - ST - ZIP	MIRAMAR FL 33029
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DP
NAME	IUY, TANYA
STREET ADDRESS	17620 SW 32 ST
CITY - ST - ZIP	MIRAMAR FL 33029
TITLE	DVP
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	DS
NAME	LOPEZ, JESUS
STREET ADDRESS	3172 SW 176 WAY
CITY - ST - ZIP	MIRAMAR FL 33029
TITLE	DT
NAME	REYES, JUANITA
STREET ADDRESS	17698 SW 32 ST
CITY - ST - ZIP	MIRAMAR FL 33029
TITLE	D
NAME	ROJAS, LORESA
STREET ADDRESS	17695 SW 32 ST
CITY - ST - ZIP	MIRAMAR FL 33029
TITLE	D
NAME	ROJAS, MACIA
STREET ADDRESS	17626 SW 32 ST
CITY - ST - ZIP	MIRAMAR FL 33029

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 like empowered.	
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SIGNATURE: <i>Tanya Iuy</i>	3-22-07	954 438-6570
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		
Date Daytime Phone #		