2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100260

Entity Name: SANDALS REAL ESTATE, INC.

FILED Feb 22, 2008 Secretary of State

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

9202 NUGENT TR 500 SOUTH AUSTRALIAN AVENUE WEST PALM BEACH, FL 33411 US

640

WEST PALM BEACH, FL 334016223 US

Current Mailing Address: New Mailing Address:

P.O. BOX 2582 P.O. BOX 2582

PALM BEACH, FL 33480 US PALM BEACH, FL 334802582 US

FEI Number: 16-1758575 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:

GLASS, TIMOTHY G ESQ. GLASS, TIMOTHY G ESQ. 9202 NÚGENT TRAIL 500 SOUTH AUSTRALIAN AVENUE

WEST PALM BEACH, FL 33411 US WEST PALM BEACH, FL 334016223 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: TIMOTHY G GLASS 02/22/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

GLASS, TIMOTHY G GLASS, TIMOTHY G Name: Name: P.O. BOX 2582 P.O. BOX 2582 Address: Address:

City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: PALM BEACH, FL 334802582 US

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

DOLAN, CHAD Name: DOLAN, CHAD Name: 1425 RIDGE BOULEVARD 1425 RIDGE BOULEVARD Address: Address:

CONNELLSVILLE, PA 15425 US CONNELLSVILLE, PA 154251532 US City-St-Zip: City-St-Zip:

Title: Title: VΡ VP. () Delete (X) Change () Addition

DOLAN, JOHN DOLAN, JOHN Name: Name: 204 PINE STREET 204 PINE STREET Address: Address:

City-St-Zip: CONNELLSVILLE, PA 15425 US City-St-Zip: CONNELLSVILLE, PA 154254832 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: TIMOTHY G GLASS 02/22/2008