

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000033713

FILED
Apr 16, 2009
Secretary of State

Entity Name: SAGE DEVELOPMENT COMPANY

Current Principal Place of Business:

1205 WEST SWANN AVENUE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

1205 WEST SWANN AVENUE
TAMPA, FL 33606

New Mailing Address:

FEI Number: 26-2314241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESSINGER, DAVID A
150 WEST FLAGER STREET
MUSEUM TOWER, SUITE 2200
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

KOEHLER, DEBRA F
1205 W. SWANN AVENUE
TAMPA, FL 33606 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: DEBRA F. KOEHLER 04/16/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT () Change (X) Addition
Name: KOEHLER, DEBRA F
Address: 1205 W. SWANN AVENUE
City-St-Zip: TAMPA, FL 33606 US

Title: VP,S () Change (X) Addition
Name: TURNER, TODD S
Address: 1205 W. SWANN AVENUE
City-St-Zip: TAMPA, FL 33606 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.

SIGNATURE: DEBRA F. KOEHLER PRES 04/16/2009
Electronic Signature of Signing Officer or Director Date