

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000037547

Entity Name: SABLE RIDGE REALTY, INC.

FILED
Apr 25, 2009
Secretary of State

Current Principal Place of Business:

2700 N. MILITARY TRAIL, SUITE 130
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2700 N. MILITARY TRAIL, SUITE 130
BOCA RATON, FL 33431

New Mailing Address:

6778 VIA REGINA #25
BOCA RATON, FL 33433

FEI Number: 26-4448580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSTEIN LAPAYOWKER, LLP
2700 N. MILITARY TRAIL, SUITE 130
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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: _____

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: P () Change (X) Addition
Name: MCELHERAN, GREGORY
Address: 6778 VIA REGINA #25
City-St-Zip: BOCA RATON, FL 33433

Title: O () Change (X) Addition
Name: MCELHERAN, MICHAEL
Address: 6778 VIA REGINA #25
City-St-Zip: BOCA RATON, FL 33433

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: GREGORY MCELHERAN

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04/25/2009

Electronic Signature of Signing Officer or Director

_____ Date