

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000090752

Entity Name: SAPPHIRE CONSULTANTS, INC.

FILED
Apr 23, 2006
Secretary of State

Current Principal Place of Business:

1862 IVORY CANE POINTE
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

1862 IVORY CANE POINTE
NAPLES, FL 34119

New Mailing Address:

FEI Number: 13-3974232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUPPES, MICHELLE P
1862 IVORY CANE POINTE
NAPLES, FL 34119 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: P () Delete
Name: SUPPES, MICHELLE P
Address: 1862 IVORY CANE
City-St-Zip: NAPLES, FL 34119

Title: S () Delete
Name: ANTHONY, MARK
Address: 1862 IVORY CANE POINTE
City-St-Zip: NAPLES, FL 34119

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANTHONY, MARK
Address: 1862 IVORY CANE POINTE
City-St-Zip: NAPLES, FL 34119

Title: S (X) Change () Addition
Name: SUPPES, MICHELLE
Address: 1862 IVORY CANE POINTE
City-St-Zip: NAPLES, FL 34119

Title: DIR () Change (X) Addition
Name: ANTHONY, MARK
Address: 1862 IVORY CANE POINTE
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK ANTHONY

DIR

04/23/2006

Electronic Signature of Signing Officer or Director

Date