2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N16000003439

Entity Name: SAPPHIRE COVE HOMEOWNERS ASSOCIATION, INC.

FILED
Oct 02, 2024
Secretary of State
6587446222CC

Current Principal Place of Business:

9150 GALLERIA COURT SUITE 201

NAPLES, FL 34109

Current Mailing Address:

9150 GALLERIA COURT SUITE 201 NAPLES, FL 34109 US

FEI Number: 87-1455147 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANDCASTLE COMMUNITY MANAGEMENT 9150 GALLERIA COURT SUITE 201 NAPLES, FL 34109 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: DAMIAN SCHAEFFER 10/02/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name GRAW, DONALD Name HARVEY, ANTHONY

Address 9150 GALLERIA COURT SUITE 201 Address 9150 GALLERIA COURT SUITE 201

City-State-Zip: NAPLES FL 34109 City-State-Zip: NAPLES FL 34109

Title TREASURER Title DIRECTOR

Name PRIDAL-PETERS, GRACE Name PRATT, BARBARA

Address 9150 GALLERIA COURT SUITE 201 Address 9150 GALLERIA COURT SUITE 201

City-State-Zip: NAPLES FL 34109 City-State-Zip: NAPLES FL 34109

Title SECRETARY Title DIRECTOR

Name ROSONE, EVA Name ZAPPIA, RICCARDO

Address 9150 GALLERIA COURT SUITE 201 Address 9150 GALLERIA COURT SUITE 201

City-State-Zip: NAPLES FL 34109 City-State-Zip: NAPLES FL 34109

Title DIRECTOR

Name CUMMINGS, MALCOLM

Address 9150 GALLERIA COURT SUITE 201

City-State-Zip: NAPLES FL 34109

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONALD GRAW PRESIDENT 10/02/2024

Electronic Signature of Signing Officer/Director Detail

Date