

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K61543

Entity Name: SABAL BAY, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

STE 400
3003 TAMIAMI TRAIL N.
NAPLES, FL 34103 US

Current Mailing Address:

STE 400
3003 TAMIAMI TRAIL N.
NAPLES, FL 34103 US

New Principal Place of Business:

3003 TAMIAMI TRAIL NORTH
SUITE 400
NAPLES, FL 34103 US

New Mailing Address:

3003 TAMIAMI TRAIL NORTH
SUITE 400
NAPLES, FL 34103 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORINA, ROBERT D
3003 TAMIAMI TRAIL NORTH, STE 400
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

CORINA, ROBERT D
3003 TAMIAMI TRAIL NORTH
SUITE 400
NAPLES, FL 34103 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: _____

Electronic Signature of Registered Agent

04/22/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: UTTER, PATRICK L
Address: 3003 TAMIAMI TRAIL N. STE 400
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: CORINA, ROBERT D
Address: 3003 TAMIAMI TRAIL N, #400
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: FLOOD, THOMAS J
Address: 3003 TAMIAMI TRAIL N, #400
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: UTTER, PATRICK L
Address: 3003 TAMIAMI TRAIL NORTH, SUITE 400
City-St-Zip: NAPLES, FL 34103 US

Title: D (X) Change () Addition
Name: CORINA, ROBERT D
Address: 3003 TAMIAMI TRAIL NORTH, SUITE 400
City-St-Zip: NAPLES, FL 34103 US

Title: D (X) Change () Addition
Name: FLOOD, THOMAS J
Address: 3003 TAMIAMI TRAIL NORTH, SUITE 400
City-St-Zip: NAPLES, FL 34103 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: ROBERT D. CORINA

Electronic Signature of Signing Officer or Director

D

04/22/2009

Date