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: DEE BRAUND

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent

SIGNATURE:

**Officer/Director Detail :** Title PRESIDENT Title TD BRAUND, DEE Name SOUTHARD, STEVE Name Address 93 SADDLEBAG TRAIL Address **45 SILVERSIDES** City-State-Zip: LAKE WALES FL 33898 LAKE WALES FL 33898 City-State-Zip: Title VP Title SD Name WRIGHT, JAYE Name BLACKBURN, TOMI Address **11 BEAVERKILL** Address 21 WOODRUFF WAY

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.

# 499 SADDLEBAG LAKE ROAD

## Entity Name: SADDLEBAG LAKE OWNERS ASSOCIATION

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

499 SADDLEBAG LAKE ROAD LAKE WALES. FL 33898

DOCUMENT# 724771

#### **Current Mailing Address:**

LAKE WALES. FL 33898 US

#### FEI Number: 59-1515157

### Name and Address of Current Registered Agent:

STAMBAUGH, INC. **500 ORCHID SPRINGS DRIVE** WINTER HAVEN, FL 33884 US



PRESIDENT

04/11/2015 Date

FILED Apr 11, 2015 Secretary of State CC9433699296

Date

Certificate of Status Desired: No