2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724771

Entity Name: SADDLEBAG LAKE OWNERS ASSOCIATION

Current Principal Place of Business:

499 SADDLEBAG LAKE ROAD LAKE WALES. FL 33898

Current Mailing Address:

499 SADDLEBAG LAKE ROAD LAKE WALES. FL 33898 US

FEI Number: 59-1515157 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

Date

FILED Feb 28, 2022

Secretary of State

5292779180CC

Officer/Director Detail :

Title **PRESIDENT** Title VΡ

MOCK, BARBARA GRAFF, KAREN Name Name

499 SADDLEBAG LAKE ROAD 500 ORCHID SPRINGS DR Address Address City-State-Zip: WINTER HAVEN FL 33884 LAKE WALES FL 33898 City-State-Zip:

Title **TREASURER** Title VΡ

Name POTHECARY, DAVID SPEIDEL, SUZANNE Name

Address 499 SADDLEBAG LAKE ROAD Address 499 SADDLEBAG LAKE ROAD LAKE WALES FL 33898 City-State-Zip: City-State-Zip: LAKE WALES FL 33898

Title DIRECTOR, ASST. SECRETARY Title **DIRECTOR**

Name GOODWIN, JOHN Name BRANNON, EDGAR

Address 499 SADDLEBAG LAKE ROAD Address 499 SADDLEBAG LAKE ROAD

City-State-Zip: LAKE WALES FL 33898 LAKE WALES FL 33898 City-State-Zip:

Title ASST. TREASURER Title **SECRETARY**

Name FIACCO, LINDA BLACKBURN, TOMI Name

499 SADDLEBAG LAKE ROAD Address 499 SADDLEBAG LAKE ROAD Address

City-State-Zip: LAKE WALES FL 33898 City-State-Zip: LAKE WALES FL 33898

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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.

02/28/2022 SIGNATURE: BARBARA MOCK **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name BARNHART, WILLIAM

Address 499 SADDLEBAG LAKE ROAD

City-State-Zip: LAKE WALES FL 33898