

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743965

Entity Name: SABAL LAKES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

409 E COLLEGE AVE
RUSKIN, FL 33570

FILED
Feb 03, 2014
Secretary of State
CC3959906458

Current Mailing Address:

PO BOX 1058
RUSKIN, FL 33575 US

FEI Number: 59-1880342

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRIMMER, KATHY
409 E COLLEGE AVE.
RUSKIN, FL 33575 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

Officer/Director Detail :

Title VP
Name DICKSON, JOHN
Address 101 SOLA LANE
City-State-Zip: SUN CITY CENTER FL 33573

Title S
Name NORTH, SANDRA
Address 1016 BLUEWATER DRIVE
City-State-Zip: SUN CITY CENTER FL 33573

Title T
Name REEVES, WILLIAM
Address 1021 BLUEWATER DRIVE
City-State-Zip: SUN CITY CENTER FL 33573

Title D
Name TWOMBLY, FRANK
Address 1015 BLUEWATER DRIVE
City-State-Zip: SUN CITY CENTER FL 33573

Title P
Name EGGER, JERAULD
Address 105 SOLA LANE
City-State-Zip: SUN CITY CENTER FL 33573

Title D
Name KRONER, MARY
Address 807 BLUEWATER DRIVE
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name DAVIS, DESMOND
Address 1005 BLUEWATER DRIVE
City-State-Zip: SUN CITY CENTER FL 33573

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: JERAULD EGGER

PRESIDENT

02/03/2014

Electronic Signature of Signing Officer/Director Detail

Date