2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743965

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

FILED Feb 10, 2021 Secretary of State 4514022804CC

Current Principal Place of Business:

212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572

Current Mailing Address:

212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572 US

FEI Number: 59-1880342 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNITIES FIRST ASSOCIATION MANAGEMENT LLC 212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572 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: KATHY TRIMMER 02/10/2021

> Date Electronic Signature of Registered Agent

Officer/Director Detail :

Title **PRESIDENT** Title DIRECTOR

COLE, TIMOTHY Name Name REEVES, WILLIAM

Address C/O COMMUNITIES FIRST Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC ASSOCIATION MANAGEMENT LLC

212 APOLLO BEACH BLVD 212 APOLLO BEACH BLVD

APOLLO BEACH FL 33572 APOLLO BEACH FL 33572 City-State-Zip: City-State-Zip:

Title DIRECTOR Title **TREASURER** WIENS, DAVID Name GORDON, SILVIA Name

Address C/O COMMUNITIES FIRST Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC ASSOCIATION MANAGEMENT LLC

212 APOLLO BEACH BLVD 212 APOLLO BEACH BLVD

City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip: APOLLO BEACH FL 33572

Title SECRETARY Title DIRECTOR

Name FIORE, DONNA Name WENDT, DENNIS

Address C/O COMMUNITIES FIRST Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC ASSOCIATION MANAGEMENT LLC

212 APOLLO BEACH BLVD 212 APOLLO BEACH BLVD

APOLLO BEACH FL 33572 APOLLO BEACH FL 33572 City-State-Zip: City-State-Zip:

Title LICENSED COMMUNITY

ASSOCIATION MANAGER

Name TRIMMER, KATHY

Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC

212 APOLLO BEACH BLVD

City-State-Zip: APOLLO BEACH FL 33572

SIGNATURE: KATHY TRIMMER

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. 02/10/2021

Electronic Signature of Signing Officer/Director Detail

ASSOCIATION MANAGER

LICENSED COMMUNITY