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. 04/23/2014

D

SIGNATURE: BRUNO BOUCKAERT Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0200003414

Entity Name: SABBIA MONTI PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3629 MADACA LANE TAMPA, FL 33618

Current Mailing Address:

3629 MADACA LANE **TAMPA FL 33618**

FEI Number: 26-1411456

Name and Address of Current Registered Agent:

MOORE, JAMES EIII 1107 WEST MARION AVENUE SUITE 112 PUNTA GORDA, FL 33950 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

Officer/Director Detail :

PD Title BOUCKAERT, BRUNO Name Address 3005 CARING WAY City-State-Zip: PORT CHARLOTTE FL 33952

FILED Apr 23, 2014

Secretary of State

CC1571680243

Certificate of Status Desired: No

Date