

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009854

**FILED**  
**Feb 27, 2012**  
**Secretary of State**

**Entity Name:** SABLE POINTE EAST OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

81 SEACREST BEACH BLVD EAST  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 611686  
ROSEMARY BEACH, FL 32461

**New Mailing Address:**

FEI Number: 20-0386459

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TARVER, LOYD  
SEA BREEZE ASSOC. MGMT CO  
180 CULLMAN AVE  
SANTA ROSA BEACH, FL 32459 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ADKINSON, JUDY  
Address: 1515 EDWARD CIRCLE  
City-St-Zip: TUSCALOOSA, AL 35406

Title: DS  
Name: DEITCH, ROBERT  
Address: 3583 BRUMLEY WAY  
City-St-Zip: CARMEL, IN 46033

Title: TD  
Name: HINKEBEIN, CHRIS  
Address: 133 COUNCIL ROAD  
City-St-Zip: LOUISVILLE, KY 40207

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: LOYD TARVER

CAM

02/27/2012

Electronic Signature of Signing Officer or Director

Date