## 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: DORYS KOMPOTHEKRA

Electronic Signature of Signing Officer/Director Detail

#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N04000004824

Entity Name: SABAL LAKE CONDOMINIUM ASSOCIATION, INC.

## **Current Principal Place of Business:**

6526 PEACOCK ROAD SARASOTA, FL 34242

# **Current Mailing Address:**

6524 PEACOCK ROAD SARASOTA. FL 34242 US

## FEI Number: 20-2409131

## Name and Address of Current Registered Agent:

KOMPOTHEKRA, DORYS 6524 PEACOCK ROAD SARASOTA, FL 34242 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: DORYS KOMPOTHEKRA

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

Title	D
Name	KOMPOTHEKRA, DORYS
Address	6524 PEACOCK ROAD
City-State-Zip:	SARASOTA FL 34242

# Certificate of Status Desired: No

02/16/2024

Date

Date

02/16/2024

FILED Feb 16, 2024 Secretary of State 2665775595CC

MANAGER