#### **2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000008615

Entity Name: SADDLEBAGS RIDGE HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 15, 2019
Secretary of State
6768113879CC

# **Current Principal Place of Business:**

16745 SE HIGHWAY 42 WEIRSDALE. FL 32195

## **Current Mailing Address:**

16745 SE HIGHWAY 42 WEIRSDALE, FL 32195 US

FEI Number: 81-4902977 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

TROW, DOBBINS & PISANI, P.A. 1301 NE 14TH STREET OCALA, FL 34470 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: THOMAS J. DOBBINS 01/15/2019

Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title **PRESIDENT** Title SECRETARY, TREASURER BOX, HELEN ROGERS Name DEMAN, TRINIDAD G. Name 16745 SE HWY 42 Address 16791 SE HWY 42 Address City-State-Zip: WEIRSDALE FL 32195 WEIRSDALE FL 32195 City-State-Zip:

Title DIRECTOR Title DIRECTOR

NameBOX, JUDSON G.NameDEMAN, TIMOTHY P.Address16745 SE HIGHWAY 42Address16791 SE HIGHWAY 42City-State-Zip:WEIRSDALE FL 32195City-State-Zip:WEIRSDALE FL 32195

Title DIRECTOR Title VP

Name LAPOLE, DAVID Name SPORNHAUER, SAMUEL

Address 16801 SE HIGHWAY 42 Address 21 WATER TRAK
City-State-Zip: WEIRSDALE FL 32195 City-State-Zip: OCALA FL 34472

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: HELEN ROGERS BOX PRESIDENT 01/15/2019

Date