# 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: ATKINSON, SAM

### Current Principal Place of Business: 4409 SEA MIST COURT

170 NEW SMYRNA BEACH, FL 32169

#### **Current Mailing Address:**

4409 SEA MIST COURT 170 NEW SMYRNA BEACH, FL 32169 US

SIGNATURE: SHEILA MCCOLLUM

#### FEI Number: 81-2097786

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

NEW SMYRNA BEACH ASSOCIATION MANAGEMENT, LLC 4409 SEA MIST COURT UNIT 170 NEW SMYRNA BEACH, FL 32169 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.

	Electronic Signature of Registered Agent			Date		
Officer/Dired						
Title	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR			
Name	ATKINSON, SAM	Name	CORBIN, DEBRA			
Address	2180 WEST SR 434 STE 5000	Address	2180 WEST SR 434 STE 5000			
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779			
Title	SECRETARY, DIRECTOR	Title	TREASURER, DIRECTOR			
Name	GRAHAM, JENNY	Name	EDWARDS, STEWART			
Address	2180 WEST SR 434 STE 5000	Address	2180 WEST SR 434 STE 5000			
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779			
Title	DIRECTOR					
Name	OMARA, JOHN					
Address	2180 WEST SR 434 STE 5000					
City-State-Zip:	LONGWOOD FL 32779					

## 2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N15000006951

Entity Name: SABAL LAKES OF NEW SMYRNA HOMEOWNERS ASSOCIATION, INC.

### Nov 05, 2023 Secretary of State 2495939655CC

FILED

Certificate of Status Desired: No

PRESIDENT

11/05/2023