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: DOUGLAS WILSON

Electronic Signature of Signing Officer/Director Detail

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N36084

Entity Name: SABAL COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9031 TOWN CENTER PKWY BRADENTON, FL 34202

Current Mailing Address:

595 BAY ISLES ROAD 200 LONGBOAT KEY, FL 34228 US

FEI Number: 65-0192077

Name and Address of Current Registered Agent:

ADVANCED MGMT OF SOUTHWEST FLORIDA, INC 9031 TOWN CENTER PKWY BRADENTON, FL 34202 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 :

	Title	PRESIDENT	Title	DIRECTOR
	Name	CRAIG, CYNTHIA	Name	BLOCH, JACK
	Address	9031 TOWN CENTER PKWY	Address	9031 TOWN CENTER PKWY
	City-State-Zip:	BRADENTON FL 34202	City-State-Zip:	BRADENTON FL 34202
	Title	TREASURER	Title	AS
	Name	GUTRIDGE, DAVID	Name	WILSON, DOUGLAS E
	Address	9031 TOWN CENTER PKWY	Address	9031 TOWN CENTER PKWY
	City-State-Zip:	BRADENTON FL 34202	City-State-Zip:	BRADENTON FL 34202
	Title	VP	Title	SECRETARY
	Name	BLUME, MYRA	Name	LINHART, LARRY
	Address	9031 TOWN CENTER PKWY	Address	9031 TOWN CENTER PKWY
	City-State-Zip:	BRADENTON FL 34202	City-State-Zip:	BRADENTON FL 34202

FILED Apr 22, 2019 Secretary of State 1282241791CC

Certificate of Status Desired: No

04/22/2019 Date

ASSISTANT SECRETARY

Date