

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N36906

**FILED  
Mar 30, 2022  
Secretary of State  
3116623514CC**

**Entity Name:** SABLE CHASE CLUSTER SUBDIVISION COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
GAINESVILLE, FL 32607

**Current Mailing Address:**

C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
GAINESVILLE, FL 32607 US

**FEI Number: 59-3084470**

**Certificate of Status Desired: No**

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

JORDAN, CHRISTOPHER  
C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
GAINESVILLE, FL 32607 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:** CHRISTOPHER JORDAN

03/30/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name COURTS, MARY ANN  
Address C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
City-State-Zip: GAINESVILLE FL 32607

Title TREASURER  
Name DAVIDSON, REBECCA  
Address C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
City-State-Zip: GAINESVILLE FL 32607

Title DIRECTOR  
Name FREEMAN, JOHN  
Address C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
City-State-Zip: GAINESVILLE FL 32607

Title PRESIDENT  
Name PELTER, LINDA  
Address C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
City-State-Zip: GAINESVILLE FL 32607

Title DIRECTOR  
Name SLODZINSKI, BRIAN  
Address C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
City-State-Zip: GAINESVILLE FL 32607

Title REGISTERED AGENT  
Name JORDAN, CHRISTOPHER  
Address C/O VESTA PROPERTY SERVICES  
5950 NW 1 PL SUITE 160  
City-State-Zip: GAINESVILLE FL 32607

*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:** CHRISTOPHER JORDAN

**REGISTERED AGENT**

03/30/2022

Electronic Signature of Signing Officer/Director Detail

Date