

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002988

**FILED**  
**Feb 23, 2012**  
**Secretary of State**

**Entity Name:** SABAL CREEK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1190 PELICAN BAY DR  
DAYTONA BEACH, FL 32119 US

**New Principal Place of Business:**

**Current Mailing Address:**

1190 PELICAN BAY DR  
DAYTONA BEACH, FL 32119 US

**New Mailing Address:**

**FEI Number:** 59-3200765

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREEN, GAIL  
6093 SABAL BROOK WAY  
PORT ORANGE, FL 32128 US

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

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

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SMITH, IDA  
Address: 6104 SABAL POINT CIRCLE  
City-St-Zip: PORT ORANGE, FL 32128

Title: SD  
Name: MARANCHICK, KELLY  
Address: 6103 SABAL HAMMOCK CIR.  
City-St-Zip: PORT ORANGE, FL 32128

Title: PD  
Name: FAGARAGAN, JOHN  
Address: 6104 SABAL HAMMOCK C  
City-St-Zip: PORT ORANGE, FL 32128

Title: TD  
Name: GREEN, GAIL  
Address: 6093 SABAL BROOK WAY  
City-St-Zip: PORT ORANGE, FL 32128

Title: DVP  
Name: RIDOUT, NEIL J  
Address: 6190 SABAL POINT CIRCLE  
City-St-Zip: PORT ORANGE, FL 32128

Title: D  
Name: ELLGARD, ARNE  
Address: 6068 SABAL CREEK BLVD.  
City-St-Zip: PORT ORANGE, FL 32128

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: JOHN FAGARAGAN

PD

02/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date