

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N93000002988

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

**Current Principal Place of Business:**

1190 PELICAN BAY DR  
DAYTONA BEACH, FL 32119

**Current Mailing Address:**

1190 PELICAN BAY DR  
DAYTONA BEACH, FL 32119 US

**FEI Number:** 59-3200765

**Certificate of Status Desired:** No

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

BARKIN, MICHELE  
1190 PELICAN BAY DRIVE  
DAYTONA BEACH, FL 32119 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:** MICHELE BARKIN

11/27/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title SD  
Name MARTIN, JAMES  
Address 6097 SABAL BROOK WAY  
City-State-Zip: PORT ORANGE FL 32128

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

Title D, TREASURER  
Name CLIFTON, ROBERT  
Address 6056 SABAL CREEK BLVD.  
City-State-Zip: PORT ORANGE FL 32128

Title DVP  
Name ELLGARD, ARNE  
Address 6068 SABAL CREEK BLVD.  
City-State-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

PRESIDENT

11/27/2013

Electronic Signature of Signing Officer/Director Detail

Date