1190 PELICAN	ncipal Place of Business: I BAY DR ACH, FL 32119			
Current Ma	iling Address:			
	AN BAY DR BEACH, FL 32119 US			
FEI Number: 59-3200765			Certificate of Status Desired: No	
Name and	Address of Current Registered Agent:			
BARKIN, MICH 1190 PELICAN DAYTONA BE				
The above name	ed entity submits this statement for the purpose of changing its re	egistered office or regis	tered agent, or both, in the State of F	lorida.
	ed entity submits this statement for the purpose of changing its re E: MICHELE BARKIN	egistered office or regis	tered agent, or both, in the State of F	lorida. 03/07/2014
		egistered office or regis	tered agent, or both, in the State of F	
SIGNATUR	E: MICHELE BARKIN	egistered office or regis	tered agent, or both, in the State of F	03/07/2014
SIGNATUR	E: MICHELE BARKIN Electronic Signature of Registered Agent	egistered office or regis	tered agent, or both, in the State of F	03/07/2014
SIGNATUR Officer/Dire	E: MICHELE BARKIN Electronic Signature of Registered Agent			03/07/2014
SIGNATUR Officer/Dire	E: MICHELE BARKIN Electronic Signature of Registered Agent ector Detail : DIRECTOR, SECRETARY	Title	VP	03/07/2014
SIGNATUR Officer/Dire Title Name	E: MICHELE BARKIN Electronic Signature of Registered Agent Ector Detail : DIRECTOR, SECRETARY SMITH, IDA 6104 SABAL POINT CIRCLE	Title Name	VP MARTIN, JAMES 6097 SABAL BROOK WAY	03/07/2014
SIGNATUR Officer/Dire Title Name Address	E: MICHELE BARKIN Electronic Signature of Registered Agent Ector Detail : DIRECTOR, SECRETARY SMITH, IDA 6104 SABAL POINT CIRCLE	Title Name Address	VP MARTIN, JAMES 6097 SABAL BROOK WAY	03/07/2014
SIGNATUR Officer/Dire Title Name Address City-State-Zip:	E: MICHELE BARKIN Electronic Signature of Registered Agent Ector Detail : DIRECTOR, SECRETARY SMITH, IDA 6104 SABAL POINT CIRCLE PORT ORANGE FL 32128	Title Name Address	VP MARTIN, JAMES 6097 SABAL BROOK WAY	03/07/2014
SIGNATUR Officer/Dire Title Name Address City-State-Zip: Title	E: MICHELE BARKIN Electronic Signature of Registered Agent Ector Detail : DIRECTOR, SECRETARY SMITH, IDA 6104 SABAL POINT CIRCLE PORT ORANGE FL 32128 PD	Title Name Address	VP MARTIN, JAMES 6097 SABAL BROOK WAY	03/07/2014

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

03/07/2014

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N9300002988

Entity Name: SABAL CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

FILED Mar 07, 2014 Secretary of State CC9782415891

Date