

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002988

**FILED**  
**Feb 27, 2015**  
**Secretary of State**  
**CC0082178878**

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

**Current Principal Place of Business:**

927 BEVILLE ROAD  
SUITE 3  
S. DAYTONA, FL 32119

**Current Mailing Address:**

927 BEVILLE ROAD  
SUITE 3  
S. DAYTONA, FL 32119 US

**FEI Number: 59-3200765**

**Certificate of Status Desired: No**

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

DAYTONA REALTY AND PROPERTY MANAGEMENT, LLC  
927 BEVILLE ROAD  
SUITE 3  
S. DAYTONA, 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: MARYKE GUILD**

**02/27/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MARTIN, JAMES  
Address C/O DRPM  
927 BEVILLE ROAD 3  
City-State-Zip: S DAYTONA FL 32119

Title PD  
Name FAGARAGAN, JOHN  
Address C/O DRPM  
927 BEVILLE ROAD 3  
City-State-Zip: S DAYTONA FL 32119

Title TREASURER  
Name WEBER, THOMAS  
Address C/O DRPM  
927 BEVILLE ROAD 3  
City-State-Zip: S DAYTONA FL 32119

Title SECRETARY  
Name WEBER, MARY  
Address C/O DRPM  
927 BEVILLE ROAD 3  
City-State-Zip: S DAYTONA FL 32119

Title VP  
Name GUELE, FRANK  
Address C/O DRPM  
927 BEVILLE ROAD 3  
City-State-Zip: S DAYTONA FL 32119

*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**

**02/27/2015**

Electronic Signature of Signing Officer/Director Detail

Date