2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002988

Entity Name: SABAL CREEK HOMEOWNERS ASSOCIATION, INC.

FILED Feb 06, 2017 Secretary of State CC7963452063

Date

Date

Current Principal Place of Business:

2271 OLD KINGS RD. PORT ORANGE, FL 32129

Current Mailing Address:

PO BOX 214923

SOUTH DAYTONA. FL 32121 US

FEI Number: 59-3200765 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WIMMER COMMUNITY ASSOCIATION MANAGEMENT, INC. 2271 OLD KINGS RD.

PORT ORANGE, FL 32129 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: TERI WIMMER 02/06/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR, VP Title DIRECTOR

Name MARTIN, JAMES Name BAILEY, MAUREEN

Address C/O WIMMER CAM
PO BOX 214923 Address C/O WIMMER CAM
PO BOX 214923 PO BOX 214923

DOX 214923

City-State-Zip: SOUTH DAYTONA FL 32121 City-State-Zip: SOUTH DAYTONA FL 32121

Title TREASURER, DIRECTOR Title PRESIDENT, DIRECTOR

NameGREEN, GAILNameHARRAKA, PETERAddressC/O WIMMER CAMAddressC/O WIMMER CAM

PO BOX 214923 PO BOX 214923

City-State-Zip: SOUTH DAYTONA FL 32121 City-State-Zip: SOUTH DAYTONA FL 32121

Title SECRETARY

Name KARLAN, DREW

Address C/O WIMMER CAM
P.O. BOX 214923

City-State-Zip: SOUTH DAYTONA FL 32121

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: PETER HARRAKA P 02/06/2017