

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002988

FILED
Mar 30, 2020
Secretary of State
9199691266CC

Entity Name: SABAL CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1898 S CLYDE MORRIS BLVD
380
DAYTONA BEACH, FL 32119

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.
1898 S CLYDE MORRIS BLVD
380
SOUTH DAYTONA, 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

03/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name WILL, MATHIS
Address C/O WIMMER CAM
PO BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121

Title DIRECTOR
Name HARRAKA, PETER
Address C/O WIMMER CAM
PO BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121

Title DIRECTOR
Name KARLAN, DREW
Address C/O WIMMER CAM
P.O. BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121

Title DIRECTOR
Name HEPPNER, LYN
Address C/O WIMMER CAM
P.O. BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121

Title DIRECTOR
Name LEFERBE, JON
Address C/O WIMMER CAM
P.O. BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121

Title DIRECTOR
Name ELLGARD, ARNIE
Address C/O WIMMER CAM
P.O. BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121

Title DIRECTOR
Name MOREY, MIKE
Address C/O WIMMER CAM
P.O. BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121

Title DIRECTOR
Name WEBER, CHERYL
Address C/O WIMMER CAM
P.O. BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121

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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: WILL MATHIS

DIRECTOR

03/30/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name EMERSON, TRENT
Address C/O WIMMER CAM
 P.O. BOX 214923
City-State-Zip: SOUTH DAYTONA FL 32121