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

DOCUMENT# N97000002741

Entity Name: SADDLEBAG CREEK RANCHES HOMEOWNERS'

ASSOCIATION, INC.

ASSOCIATION, INC.

# **Current Principal Place of Business:**

30106 SADDLEBAG TRAIL MYAKKA CITY, FL 34251

### **Current Mailing Address:**

P.O. BOX 432

MYAKKA CITY, FL 34251

FEI Number: 20-0671981 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

APATI, RICHARD PD 30106 SADDLEBAG TRAIL MYAKKA CITY, FL 34251 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:

Electronic Signature of Registered Agent

Date

FILED Apr 24, 2013

**Secretary of State** 

CC9518800133

### Officer/Director Detail:

Title PD Title D

NameAPATI, RICHARDNameEDWARDS, RONNIEAddress30106 SADDLEBAG TRAddress29809 SADDLEBAG TRCity-State-Zip:MYAKKA CITY FL 34251City-State-Zip:MYAKKA CITY FL 34251

Title D Title STD

Name SIMON, DALE Name DOBBS, MICHAEL

Address 29617 SADDLEBAG TR Address 30203 SAPPLEBAG TR
City-State-Zip: MYAKKA CITY FL 34251 City-State-Zip: MYAKKA CITY FL 34251

Title D

Name LUCAS, ROBERT

Address 29416 SADDLEBAG TR

City-State-Zip: MYAKKA CITY FL 34251

SIGNATURE: RICHARD APATI

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.

Electronic Signature of Signing Officer/Director Detail

04/24/2013

PD

Date