SIGNATURE: KEN THOMAS

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9800005247

Entity Name: SABAL COVE RESIDENTS' ASSOCIATION, INC.

Current Principal Place of Business:

1035 COLLIER CENTER WAY SUITE 7 NAPLES, FL 34110

Current Mailing Address:

1035 COLLIER CENTER WAY SUITE 7 NAPLES, FL 34110

FEI Number: 03-0404947

Name and Address of Current Registered Agent:

BONITA SPRINGS FL 34135

THOMPSON, SUSAN 1035 COLLIER CENTER WAY #7 NAPLES, FL 34110 US

Name

Address

City-State-Zip:

The above named entity submits this statement for the purpose of changing its registered o SIGNATURE: Electronic Signature of Registered Agent **Officer/Director Detail :** Title PRESIDENT Title TREASURER Name THOMAS, KEN Name PECK, ROBERT 9095 SPRING RUN BLVD Address 9105 SPRING RUN BLVD Address BONITA SPRINGS FL 34135 City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip: TREASURER Title VP Title Name ROMANO, SUSAN Name **GULLOTTI, MARY ANN** Address 9023 SPRING RUN BLVD Address 9075 SPRING RUN BLVD City-State-Zip: BONITA SPRINGS FL 34135 BONITA SPRINGS FL 34135 City-State-Zip: Title SECRETARY Title DIRECTOR

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.

Name POTERE, WILLIAM Address 9043 SPRING RUN BLVD

PRESIDENT

office or registered agent, or both, in the State of Florida.	
	Date

PECK. ROBERT

City-State-Zip:

9105 SPRING RUN BLVD

BONITA SPRINGS FL 34135

Certificate of Status Desired: No

FILED Apr 01, 2016 Secretary of State CC0114454080

> 04/01/2016 Date