## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005247

Entity Name: SABAL COVE RESIDENTS' ASSOCIATION, INC.

**FILED** Mar 22, 2024 **Secretary of State** 0483392029CC

## **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 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MORDAUNT, JAMES 1035 COLLIER CENTER WAY

NAPLES, FL 34110 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: JAMES MORDAUNT 03/22/2024

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **SECRETARY** Title

ROTHWELL, ELIOT Name Name GULLOTTI, MARY ANN

1035 COLLIER CNTR WAY #7 1035 COLLIER CENTER WAY #7 Address Address

NAPLES FL 34110 NAPLES FL 34110 City-State-Zip: City-State-Zip:

**PRESIDENT** Title DIRECTOR Title Name REED, LARRY RICHARDSON, NANCY Name

1035 COLLIER CENTER WAY 7 Address 1035 COLLIER CNTR WAY 7 Address

City-State-Zip: NAPLES FL 34110 City-State-Zip: NAPLES FL 34110

Title **TREASURER** Name BOZZUTO, BETTY

Address 1035 COLLIER CNTR WY 7

City-State-Zip: NAPLES FL 34110

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.

03/22/2024 SIGNATURE: LARRY REED **PRESIDENT**