

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009857

FILED
Mar 27, 2011
Secretary of State

Entity Name: SABLE POINTE WEST OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

80 SEACREST BEACH BLVD. W
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

PO BOX 611686
ROSEMARY BEACH, FL 32461

New Mailing Address:

FEI Number: 20-0386517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TARVER, LOYD
SEA BREEZE ASSOC. MGMT. CO.
180 CULLMAN AVE.
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DVP
Name: RIGDEN, KENNETH
Address: 12574 DURBIN DR
City-St-Zip: ST LOUIS, MO 63141

Title: DP
Name: MAY, BROOKS
Address: 4704 CHAUNCEY LEE LANE
City-St-Zip: LOUISVILLE, KY 40241

Title: DS
Name: ADELMAN, DEAN
Address: 2145 COLLINS DRIVE N.W.
City-St-Zip: ATLANTA, GA 30318

Title: DT
Name: SHARP, BARBARA
Address: 5306 SIR LIONEL CT.
City-St-Zip: CHARLOTTE, NC 28277

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: BROOKS MAY

PRES

03/27/2011

Electronic Signature of Signing Officer or Director

Date