

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 728681

**Entity Name:** SAGA BAY PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

15600 SW 288 STREET  
SUITE 406  
HOMESTEAD, FL 33033

**Current Mailing Address:**

PO BOX 924176  
HOMESTEAD, FL 33092 US

**FEI Number:** 59-2102284

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JURADO LAW GROUP, PA  
6401 NW 74 AVENUE  
MIAMI, FL 33166 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

**Officer/Director Detail :**

Title DIRECTOR  
Name SANTANA, LUIS  
Address 15600 SW 288 STREET, #406  
City-State-Zip: HOMESTEAD FL 33033

Title DIRECTOR, VP  
Name WESTGATE, CHRISTOPHER  
Address 15600 SW 288 STREET  
SUITE 406  
City-State-Zip: HOMESTEAD FL 33033

Title DIRECTOR, SECRETARY  
Name MEJIA- LOPEZ, LORNA  
Address 15600 SW 288 STREET  
SUITE 406  
City-State-Zip: HOMESTEAD FL 33033

Title DIRECTOR  
Name GUILLEN, ADRIAN  
Address 15600 SW 288 STREET  
SUITE 406  
City-State-Zip: HOMESTEAD FL 33033-1249

Title DIRECTOR, TREASURER  
Name NANNI, ARTHUR JR.  
Address 15600 SW 288 STREET  
SUITE 406  
City-State-Zip: HOMESTEAD FL 33033

Title DIRECTOR, PRESIDENT  
Name POWELL, JANET  
Address 15600 SW 288 STREET  
SUITE 406  
City-State-Zip: HOMESTEAD FL 33033

Title DIRECTOR  
Name CRAVEN , MICHELLE  
Address 15600 SW 288 STREET  
SUITE 406  
City-State-Zip: HOMESTEAD FL 33033-1249

Title DIRECTOR  
Name ZOLL, DAVID JAMES  
Address 15600 SW 288 STREET  
SUITE 406  
City-State-Zip: HOMESTEAD FL 33033-1249

*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:** JANET POWELL

**PRESIDENT**

**09/24/2020**

Electronic Signature of Signing Officer/Director Detail

Date