

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740544

Entity Name: SABAL CHASE CONDOMINIUM ASSOCIATION (II), INC.**Current Principal Place of Business:**10999 SW 113 PL
MIAMI, FL 33176**Current Mailing Address:**C/O FIRSTSERVICE RESIDENTIAL
10999 SW 113 PL
MIAMI, FL 33176 US**FEI Number:** 59-1801744**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.
201 ALHAMBRA CIRCLE, SUITE 201
CORAL GABLES, FL 33134 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	PRESIDENT
Name	PUMA, ALEX
Address	10631 SW 113 PL UNIT C
City-State-Zip:	MIAMI FL 33176
Title	SECRETARY
Name	GOLDSTEIN, DEVRA
Address	10631 SW 113 PLACE UNIT A
City-State-Zip:	MIAMI FL 33176
Title	DIRECTOR
Name	GREENE, MAUREEN
Address	10761 SW 113 PL
City-State-Zip:	MIAMI FL 33176

Title	TREASURER
Name	STROUD, PENNI
Address	10643 SW 113 PL UNIT C
City-State-Zip:	MIAMI FL 33176
Title	DIRECTOR
Name	WINDOVER, STEVEN
Address	10649 SW 113 PL UNIT D
City-State-Zip:	MIAMI FL 33176
Title	DIRECTOR
Name	DELGADO, AURORA
Address	10665 A SW 113 PL
City-State-Zip:	MIAMI FL 33176

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: ALEX PUMA**PRESIDENT****02/21/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date