

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744415

Entity Name: SUGARTREE HOMEOWNER'S ASSOCIATION, INC.

FILED
Mar 03, 2021
Secretary of State
7297517074CC

Current Principal Place of Business:

8800 UNIVERSITY PKWY
SUITE B3
PENSACOLA, FL 32514

Current Mailing Address:

P. O. BOX 30565
PENSACOLA, FL 32503-1565 US

FEI Number: 59-2188986

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATION MANAGEMENT GROUP OF W FL
8800 UNIVERSITY PKWY
SUITE B3
PENSACOLA, FL 32524 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: MARY BAISDEN

03/03/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name STRAYHORN, CECILIA
Address P. O. BOX 30565
City-State-Zip: PENSACOLA FL 32503-1565

Title MANAGING AGENT
Name BAISDEN, MARY
Address P. O. BOX 30565
City-State-Zip: PENSACOLA FL 32503-1565

Title PRESIDENT
Name WRIGHT, MATTHEW
Address P. O. BOX 30565
City-State-Zip: PENSACOLA FL 32503-1565

Title TREASURER, SECRETARY
Name HOWARD, JOHN
Address P. O. BOX 30565
City-State-Zip: PENSACOLA FL 32503-1565

Title DIRECTOR
Name SADLER, TOM
Address P. O. BOX 30565
City-State-Zip: PENSACOLA FL 32503-1565

Title DIRECTOR
Name NORRIS, DARRELL
Address P. O. BOX 30565
City-State-Zip: PENSACOLA FL 32503-1565

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: MARY BAISDEN

MANAGING AGENT

03/03/2021

Electronic Signature of Signing Officer/Director Detail

Date