

**2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 751290

**Entity Name:** SADDLEBROOK RESORT CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5700 SADDLEBROOK WAY  
WESLEY CHAPEL, FL 33543**Current Mailing Address:**5700 SADDLEBROOK WAY  
WESLEY CHAPEL, FL 33543 US**FEI Number:** 59-2182217**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALLEN, DONALD  
5700 SADDLEBROOK WAY  
WESLEY CHAPEL, FL 33543 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:** DONALD ALLEN

12/08/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                        |
|-----------------|------------------------|
| Title           | VPD                    |
| Name            | REAGAN, WILLIAM J      |
| Address         | 583 HICKORY RD         |
| City-State-Zip: | TAMPA FL 33672-0119    |
| Title           | ST                     |
| Name            | ALLEN, DONALD L.       |
| Address         | 1314 FOXWOOD DR.       |
| City-State-Zip: | LUTZ FL                |
| Title           | D                      |
| Name            | DEMPSEY, MAUREEN       |
| Address         | 5700 SADDLEBROOK WAY   |
| City-State-Zip: | WESLEY CHAPEL FL 33543 |

|                 |                            |
|-----------------|----------------------------|
| Title           | D                          |
| Name            | DEMPSEY, THOMAS L          |
| Address         | 5700 SADDLEBROOK WAY       |
| City-State-Zip: | WESLEY CHAPEL FL 33543     |
| Title           | D                          |
| Name            | ACKERMAN, STANLEY          |
| Address         | 3115 ISLAWILD WAY          |
| City-State-Zip: | THE VILLAGES FL 32163-2314 |
| Title           | PD                         |
| Name            | CHALFIN, ROBERT J          |
| Address         | 45 BRIDGE STREET           |
| City-State-Zip: | METUCHEN NJ 08840          |

*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:** DON ALLEN

ST

12/08/2016

Electronic Signature of Signing Officer/Director Detail

Date