

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003397

**FILED**  
**Apr 25, 2019**  
**Secretary of State**  
**7450685761CC**

**Entity Name:** SABAL TRACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O PINNACLE AM LLC  
430 NW LAKE WHITNEY PL  
PORT ST. LUCIE, FL 34986

**Current Mailing Address:**

C/O PINNACLE ASSOCIATION MANAGEMENT  
430 NW LAKE WHITNEY PLACE  
PORT ST LUCIE, FL 34986 US

**FEI Number:** 04-3652489

**Certificate of Status Desired:** No

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

PINNACLE ASSOCIATION MANAGEMENT  
C/O PINNACLE ASSOCIATION MANAGEMENT  
430 NW LAKE WHITNEY PLACE  
PORT ST LUCIE, FL 34986 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:** GAIL LOGAN

04/25/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ZORC, JODI  
Address        C/O PINNACLE ASSOCIATION  
                  MANAGEMENT  
                  430 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT ST LUCIE FL 34986

Title            SECRETARY  
Name            DELEON, MICHAEL  
Address        C/O PINNACLE ASSOCIATION  
                  MANAGEMENT  
                  430 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT ST LUCIE FL 34986

Title            DIRECTOR  
Name            GONZALEZ, ANDREW  
Address        C/O PINNACLE ASSOCIATION  
                  MANAGEMENT  
                  430 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT ST LUCIE FL 34986

*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:** JODI ZORC

PRESIDENT

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date