

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003562

**Entity Name:** SAWGRASS LAKES PHASE 2 ASSOCIATION, INC.

**Current Principal Place of Business:**

543 NW LAKE WHITNEY PL  
SUITE 101  
PORT SAINT LUCIE, FL 34986

**Current Mailing Address:**

543 NW LAKE WHITNEY PL  
SUITE 101  
PORT SAINT LUCIE, FL 34986

**FEI Number:** 65-1067463

**Certificate of Status Desired:** No

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

BRISTOL MANAGEMENT SERVICES  
1930 COMMERCE LANE  
SUITE 1  
JUPITER, FL 33458 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:** STEVE INGLIS

04/10/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name WALSHE, ART  
Address 543 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title 1VP  
Name MOWERY, TOD  
Address 543 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title 2VP  
Name ASHBY, CHRIS  
Address 543 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title T  
Name DIIANNI, MIKE  
Address 543 NW LAKE WHITNEY PLACE  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title S  
Name DYER, LEE  
Address 543 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:** ART WALSHE

PRESIDENT

04/10/2013

Electronic Signature of Signing Officer/Director Detail

Date