Current Pri	ncipal Place of Business:			
	SS POINTE DR.			
ORLANDO, FL				
_				
Current Mai	ling Address:			
	RASS POINTE DRIVE FL 32824 US			
FEI Number: 33-1137424			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
MARTELL & OZ				
37 N. ORANGE SUITE 500	AVENUE			
ORLANDO, FL	32801 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.				
The above hame	d entity submits this statement for the purpose of changing i	its registered office or regis	tered agent, or both, in the State of Floric	la.
	d entity submits this statement for the purpose of changing i	its registered office or regis		^{la.} 01/19/2017
		its registered office or regis		
	EIEctronic Signature of Registered Agent	its registered office or regis		01/19/2017
SIGNATURE	EIEctronic Signature of Registered Agent	its registered office or regis		01/19/2017
SIGNATURE Officer/Dire	MAX PERLMAN Electronic Signature of Registered Agent ctor Detail :			01/19/2017
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent Ctor Detail : P	Title	VP	01/19/2017
SIGNATURE Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : P PERLMAN, MAX 444 WEST NEW ENGLAND AVE	Title Name Address	VP MCGOWAN, JIM	01/19/2017
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P PERLMAN, MAX 444 WEST NEW ENGLAND AVE	Title Name Address	VP MCGOWAN, JIM 444 WEST NEW ENGLAND AVE	01/19/2017
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : P PERLMAN, MAX 444 WEST NEW ENGLAND AVE WINTER PARK FL 32789 S	Title Name Address	VP MCGOWAN, JIM 444 WEST NEW ENGLAND AVE	01/19/2017
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : P PERLMAN, MAX 444 WEST NEW ENGLAND AVE WINTER PARK FL 32789	Title Name Address	VP MCGOWAN, JIM 444 WEST NEW ENGLAND AVE	01/19/2017
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title Name	E MAX PERLMAN Electronic Signature of Registered Agent Ctor Detail : P PERLMAN, MAX 444 WEST NEW ENGLAND AVE WINTER PARK FL 32789 S ROSELLO, RICHARD 444 WEST NEW ENGLAND AVE	Title Name Address	VP MCGOWAN, JIM 444 WEST NEW ENGLAND AVE	01/19/2017

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: SAWGRASS PLANTATION ORLANDO MASTER HOMEOWNERS

DOCUMENT# N06000001312

ASSOCIATION, INC.

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.

Ρ

SIGNATURE: MAX PERLMAN

Electronic Signature of Signing Officer/Director Detail

01/19/2017 Date

FILED Jan 19, 2017

Secretary of State

CC6494495470