

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001680

Entity Name: SAWGRASS PLANTATION PHASE 1A TOWNHOME ASSOCIATION, INC.**Current Principal Place of Business:**1510 SAWGRASS POINTE DR.
ORLANDO, FL 32824**Current Mailing Address:**C/O FIRSTSERVICE RESIDENTIAL
385 DOUGLAS AVENUE; STE. 3350
ALTAMONTE SPRINGS, FL 32714 US**FEI Number: 32-0203863****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MARTELL & OZIM
27 NORTH ORANGE AVENUE, STE. 500
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.***SIGNATURE: MARGELY CASTILLO****02/06/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name CASTILLO, MARGELY
Address C/O FIRSTSERVICE RESIDENTIAL
385 DOUGLAS AVENUE; STE. 3350
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title TREASURER
Name RODRIGUEZ, OANA ANAYA
Address C/O FIRSTSERVICE RESIDENTIAL
385 DOUGLAS AVENUE; STE. 3350
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title PRESIDENT
Name FOX, DANIEL
Address C/O FIRSTSERVICE RESIDENTIAL
385 DOUGLAS AVENUE; STE. 3350
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title SECRETARY
Name KING, PATRICK
Address C/O FIRSTSERVICE RESIDENTIAL
385 DOUGLAS AVENUE; STE. 3350
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR
Name DIAZ, WANDA
Address C/O FIRSTSERVICE RESIDENTIAL
385 DOUGLAS AVENUE; STE. 3350
City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: DANIEL FOX**PRESIDENT****02/06/2018**

Electronic Signature of Signing Officer/Director Detail

Date