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: KIMBERLY SCHAEFER

OCOEE FL 34761

Electronic Signature of Signing Officer/Director Detail

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:

City-State-Zip:

Officer/Director Detail : Title Р Title S MACKUBIN, JOY Name MEYERS, MICHELLE Name Address 5019 WATER WHEEL COURT Address 5017 LIGHTERWOOD CT City-State-Zip: OCOEE FL 34761 City-State-Zip: OCOEE FL 34761 VP Title Title Т Name NICKELS, ANDREW SCHAEFER, KIMBERLY Name Address 6702 LUMBERJACK LANE

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31242

Entity Name: SAWMILL HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5021 LIGHTERWOOD CT. OCOEE, FL 34761

Current Mailing Address:

P. O. BOX 509 OCOEE. FL 34761

FEI Number: 59-2950214

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

KELLER, LAURA 5021 LIGHTERWOOD CT. OCOEE, FL 34761 US

FILED Feb 24, 2013 Secretary of State CC3677417346

Date

Certificate of Status Desired: No

Address 5111 MILL STREAM RD City-State-Zip: OCOEE FL 34761

TREASURER

Date

02/24/2013