

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48377

**FILED**  
**Feb 13, 2015**  
**Secretary of State**  
**CC9309866687**

**Entity Name:** SAWGRASS POINT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

PEGASUS PROPERTY MGMT.  
3409 PELICAN LANDING PARKWAY #3  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

PEGASUS PROPERTY MGMT.  
3409 PELICAN LANDING PARKWAY #3  
BONITA SPRINGS, FL 34134 US

**FEI Number: 59-3120546**

**Certificate of Status Desired: No**

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

CATLETT, SARA  
PEGASUS PROPERTY MGMT  
3409 PELICAN LANDING PARKWAY #3  
BONITA SPRINGS, FL 34134 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: SARA CATLETT**

**02/13/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name GRANT, BOB  
Address 3409 PELICAN LANDING PARKWAY #3  
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR, VICE-PRESIDENT  
Name DIX, DAVID  
Address 3409 PELICAN LANDING PARKWAY #3  
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR  
Name KELLY, ROBERT  
Address 3409 PELICAN LANDING PARKWAY #3  
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR  
Name CALVEY, FAYE  
Address 3409 PELICAN LANDING PARKWAY #3  
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR  
Name FAGAN, KEVIN  
Address 3409 PELICAN LANDING PARKWAY #3  
City-State-Zip: BONITA SPRINGS FL 34134

Title TREASURER, SECRETARY  
Name PEGASUS PROPERTY MANAGEMENT  
Address 17595 S. TAMiami TR. SUITE 100  
City-State-Zip: FORT MYERS FL 33908

Title TREASURER  
Name SHAW, STEPHEN  
Address 3409 PELICAN LANDING PARKWAY #3  
City-State-Zip: BONITA SPRINGS FL 34134

*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: ROBERT GRANT**

**PRESIDENT**

**02/13/2015**

Electronic Signature of Signing Officer/Director Detail

Date