## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48377

Entity Name: SAWGRASS POINT CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 24, 2016
Secretary of State
CC1510923065

## **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 03/24/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR, PRESIDENT Title DIRECTOR, VICE-PRESIDENT

Name MATTHEWS, MARK C Name FAGAN, KEVIN

Address 3409 PELICAN LANDING PARKWAY #3 Address 3409 PELICAN LANDING PARKWAY #3

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

 Title
 DIRECTOR, TREASURER
 Title
 DIRECTOR

 Name
 SHAW, STEPHEN
 Name
 LEEDY, TOM

Address 3409 PELICAN LANDING PARKWAY #3 Address 3409 PELICAN LANDING PARKWAY #3

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR Title SECRETARY

Name FAGG, JOHN Name PEGASUS PROPERTY MANAGEMENT

Address 3409 PELICAN LANDING PARKWAY #3 Address 3409 PELICAN LANDING PARKWAY #3

City-State-Zip: BONITA SPRINGS FL 34134 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

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: MARK C. MATTHEWS PRESIDENT 03/24/2016