

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000002605

**FILED**  
**Apr 15, 2013**  
**Secretary of State**  
**CC9102940198**

**Entity Name:** SAWGRASS PLANTATION OF KILLEARN HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2121 KILLARNEY WAY  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

P.O. BOX 11143  
TALLAHASSEE, FL 32302

**FEI Number: 59-3470085**

**Certificate of Status Desired: No**

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

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT  
2121 KILLARNEY WAY  
TALLAHASSEE, FL 32309 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VPD  
Name SELLERS, JOSEPH  
Address 2892 MANILA PALM COURT  
City-State-Zip: TALLAHASSEE FL 32309

Title DT  
Name VALACH, MARIAN  
Address 2440 NEEDLE PALM WAY  
City-State-Zip: TALLAHASSEE FL 32309

Title D  
Name WALLS, JUDY  
Address 2793 SAW PALMETTO LANE  
City-State-Zip: TALLAHASSEE FL 32309

Title SD  
Name DUDLEY, CHARLOTTE  
Address 2844 SAW PALMETTO LANE  
City-State-Zip: TALLAHASSEE FL 32309

Title PD  
Name LAUGHLIN, ALISON  
Address 2420 NEEDLE PALM WAY  
City-State-Zip: TALLAHASSEE FL 32309

Title D  
Name RUSSELL, PADDY  
Address 3059 ROYAL PALM WAY  
City-State-Zip: TALLAHASSEE FL 32309

*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: ALISON LAUGHLIN**

**PD**

**04/15/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date