2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732059

1. Entity Name



FILED Mar 07, 2003 8:00 am Secretary of State

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. 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. I am familiar with, and at the obligations of registered agent. 8. 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. I am familiar with, and at the obligations of registered agent. 8. 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. I am familiar with, and at the obligations or registered agent. 8. 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. I am familiar with, and at the obligations or registered agent. 8. 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. I am familiar with, and at the obligations or registered agent, or both, in the State of Florida. I am familiar with, and at the obligations or registered agent. 8. 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. I am familiar with, and at the obligations or registered agent, or both, in the State of Florida. I am familiar with, and at the obligations or registered agent, or both, in the State of Florida. I am familiar with, and a statement of State of Florida Department of State of Florida. I am familiar with, and a statement of State of Florida. I am familiar with, and a statement of State of Florida. I am familiar with, and a statement of State of Florida. I am familiar with, and a statement of State of Florida. I am familiar with, and a statement of State of	SABAL	CHASE HOMEOWNERS' AS:	SUCIATION, INC.			· ·	03-07-2003 9011	1021	1.23
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2. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes Lifurther certify that the information indicated on this report of processors and processors are considered in the control of the control o	IAME ITREET ADDRESS ITY-ST-ZIP ITLE AME THEET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME	FRIED, MURRAY 10685-Z S.W. 113T PLACE MIAMI FL D BROWN, ARNOLD A. 11233 SW 112TH STREET MIAMI FL 33176 PD MANGOLD, ROBERT 11605 S.W. 108TH TERRACE MIAMI FL 33176 D RICCARDI, GIOVANNI 11385-F SW 109 RD	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VPD MARG 1122	GOLUIS, H	OWARD	Change	Addition

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \(\square\)

3-4-03

305-596-mol