

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754786

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: SABAL PINE EAST ASSOCIATION, INC.

## Current Principal Place of Business:

2328 S. CONGRESS AVE  
SUITE 2-A  
WEST PALM BEACH, FL 33406

## New Principal Place of Business:

## Current Mailing Address:

% CUSTOM PROPERTY MGMT  
2328 S CONGRESS AVENUE # 2A  
WEST PALM BEACH, FL 33406

## New Mailing Address:

C/O CUSTOM PROPERTY MGMT  
2328 S CONGRESS AVENUE # 2A  
WEST PALM BEACH, FL 33406

FEI Number: 59-2043053

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WIRBILOWICZ, LORETTA  
2903 SW 22ND AVE  
DELRAY BEACH, FL 33445 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete  
Name: BERRITTO, ROBERT  
Address: 2328 S. CONGRESS AVE, SUITE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: TD ( ) Delete  
Name: GONZALEZ, JUAN  
Address: 2328 S CONGRESS AVE STE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: SD ( ) Delete  
Name: SCHREIBER, DIANE  
Address: 2328 S. CONGRESS AVE., SUITE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: PD ( ) Delete  
Name: WIRBILOWICZ, LORETTA  
Address: 2328 S. CONGRESS AVE., SUITE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: HUTCHINSON, CAROL  
Address: 2328 S CONGRESS AVE STE 2A  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LORETTA WIRBILOWICZ

PD

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date