

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

0054312

DOCUMENT # 760607

1. Entity Name

S.A.C. HOME ASSOCIATION, INC.

03-29-2002 90824 008 ****61.25

Principal Place of Business

Mailing Address

**20428 CORTEZ BLVD
 BROOKSVILLE FL 34601**

**20428 CORTEZ BLVD
 BROOKSVILLE FL 34601**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Brooksville, FL

4. FEI Number

59-0208637

Applied For

Not Applicable

Zip

Country

Zip

Country

34601-9998 USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CLARK, LENVILL
 12184 JAYBIRD ROAD
 BROOKSVILLE FL 34614**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Lenvill Clark

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

March 15, 2002

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME **PD MORIN, RICHARD**
 STREET ADDRESS **7224 WOODLAND DR.**
 CITY-ST-ZIP **BROOKSVILLE FL 34601**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **V GEORGE, KENNETH**
 STREET ADDRESS **7783 GORDON LOOP**
 CITY-ST-ZIP **BROOKSVILLE FL 34601**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **S KORBUS, ELMER**
 STREET ADDRESS **P.O. BOX 231 N/A**
 CITY-ST-ZIP **BROOKSVILLE FL 34605**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **T SCOVELL, WAYNE**
 STREET ADDRESS **27431 OLD SPRINGLAKE RD**
 CITY-ST-ZIP **BROOKSVILLE FL 34602**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D PIMENTEL, MANUEL**
 STREET ADDRESS **7006 WINDMERE RD**
 CITY-ST-ZIP **BROOKSVILLE FL 34602**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **FS CLARK, LENVILL**
 STREET ADDRESS **12184 JAYBIRD RD**
 CITY-ST-ZIP **BROOKSVILLE FL 34614**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lenvill Clark
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 18, 2002

Date

Daytime Phone #

352-592-6975

CR2E037 (9/01)