## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#760607** 

FILED Mar 10, 2005 Secretary of State

Entity Name: S.A.C. HOME ASSOCIATION, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
	RTEZ BLVD /ILLE, FL 34601	
Current M	lailing Address:	New Mailing Address:
PO BOX 11 BROOKS\	0206 /ILLE, FL 346019998	
FEI Number:	: 59-0208637 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and	I Address of Current Registered Agent	: Name and Address of New Registered Agent:
BROOKSV	'BIRD ROAD /ILLE, FL 34614 US	he purpose of changing its registered office or registered agent, or both,
	e of Florida.	The purpose of changing its registered office of registered agent, of both,
SIGNATUR		Anna
	Electronic Signature of Registered	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	PD () Delete MORIN, RICHARD 7224 WOODLAND DR. BROOKSVILLE, FL 34601	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V () Delete GEORGE, KENNETH 7783 GORDON LOOP BROOKSVILLE, FL 34601	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S ( ) Delete KORBUS, ELMER P.O. BOX 231 N/A BROOKSVILLE, FL 34605	Title: S (X) Change ( ) Addition Name: KORBUS, ELMER Address: P.O. BOX 231 City-St-Zip: BROOKSVILLE, FL 34605
Title: Name: Address: City-St-Zip:	T ( ) Delete SCOVELL, WAYNE 27431 OLD SPRINGLAKE RD BROOKSVILLE, FL 34602	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete PIMENTEL, MANUEL 7006 WINDMERE RD BROOKSVILLE, FL 34602	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	FS () Delete CLARK, LENVILL 12184 JAYBIRD RD BROOKSVILLE, FL 34614	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ELMER KORBUS S 03/10/2005