

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760607

FILED
Mar 07, 2007
Secretary of State

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

Current Principal Place of Business:

10459 EASTSIDE AVENUE
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

PO BOX 10206
BROOKSVILLE, FL 346019998

New Mailing Address:

FEI Number: 59-0208637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOVELL, WAYNE
27431 OLD SPRING LAKE ROAD
BROOKSVILLE, FL 34602 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: PD () Delete
Name: PIMENTEL, MANUEL
Address: 7006 WINDMERE ROAD
City-St-Zip: BROOKSVILLE, FL 34602

Title: V () Delete
Name: KORBUS, ELMER D
Address: P. O. BOX 231
City-St-Zip: BROOKSVILLE, FL 34605

Title: S () Delete
Name: SMITH, ROBERT G
Address: 25109 MALVERN STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: T () Delete
Name: SCOVELL, WAYNE
Address: 27431 OLD SPRINGLAKE RD
City-St-Zip: BROOKSVILLE, FL 34602

Title: D () Delete
Name: MORIN, RICHARD
Address: 7224 WOODLAND DRIVE
City-St-Zip: BROOKSVILLE, FL 34601

Title: FS (X) Delete
Name: CLARK, LENVILL
Address: 12184 JAYBIRD RD
City-St-Zip: BROOKSVILLE, FL 34614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
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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 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: ELMER D. KORBUS

V

03/07/2007

Electronic Signature of Signing Officer or Director

Date