2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#760837

FILED Apr 10, 2008 Secretary of State

Entity Name: SABAL POINT PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:	New Principal Place of Business:
382 JACKSON AVE. WINTER PARK, FL 32789 US	409 WOODVIEW DRIVE LONGWOOD, FL 32779 US
Current Mailing Address:	New Mailing Address:
382 JACKSON AVE. WINTER PARK, FL 32789 US	PO BOX 915365 LONGWOOD, FL 327915365 US
FEI Number: 59-2284944 FEI Number Applied For() FEI N	lumber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
BRACKIN, ANDREA 882 JACKSON AVE. WINTER PARK, FL 32789 US	CARNESALE, JOHN 409 WOODVIEW DRIVE LONGWOOD, FL 32779 US
The above named entity submits this statement for the purpose n the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: JOHN CARNESALE	04/10/2008
Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Fitle: P/D () Delete Name: COHEN, EDWARD Address: 420 VILLAGE VIEW LANE City-St-Zip: LONGWOOD, FL 32779	Title: () Change () Addition Name: Address: City-St-Zip:
Fitle: TD () Delete Name: CAMP, VANN Address: 500 WHISPERWOOD DRIVE City-St-Zip: LONGWOOD, FL 32779	Title: T/SD (X) Change () Addition Name: CARNESALE, JOHN Address: 409 WOODVIEW DRIVE City-St-Zip: LONGWOOD, FL 32779
Fitle: SD () Delete Name: ADAMS, ROBERT Address: 592 WHISPERWOOD DR City-St-Zip: LONGWOOD, FL 32779	Title: D (X) Change () Addition Name: OSBORN, SHARON Address: 301 CYPRESS LANDING DRIVE City-St-Zip: LONGWOOD, FL 32779
Title: D () Delete Name: SMITH, RICHARD Address: 528 WHISPERWOOD DRIVE City-St-Zip: LONGWOOD, FL 32779	Title: () Change () Addition Name: Address: City-St-Zip:
Fitle: () Delete Name:	Title: D () Change (X) Addition Name: COPLIN, STANLEY Address: 332 CYPRESS LANDING DRIVE
Address: City-St-Zip:	City-St-Zip: LONGWOOD, FL 32779

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: JOHN CARNESALE T/SD 04/10/2008