

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761395

FILED
Apr 21, 2009
Secretary of State

Entity Name: SAWBUCK HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

11635 NW 1ST AVE
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

11635 NW 1ST AVE
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 59-2925552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CURTIS, JOHN M
11635 NW 1ST AVE
GAINESVILLE, FL 32607 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: CURTIS, JOHN M
Address: 11635 NW 1ST AVE
City-St-Zip: GAINESVILLE, FL 00000,

Title: TD () Delete
Name: CURTIS, GAIL W
Address: 11635 NW 1ST AVE
City-St-Zip: GAINESVILLE, FL 00000,

Title: SD () Delete
Name: PAVLIC, STEVE
Address: 10827 N.W. 15TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: MARSHALL, CHARLES
Address: 111 N.W. 116TH WAY
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: HAZEN, DOUG
Address: 11626 N.W. 2ND AVENUE
City-St-Zip: GAINESVILLE, FL 32607

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
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: JOHN M CURTIS

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date