## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000000124

FILED Apr 25, 2012 Secretary of State

Entity Name: SABAL POINT HOMEOWNERS ASSOCIATION OF BREVARD COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

946 RIVIERA POINT DR
ROCKLEDGE, FL 32955
973 RIVIERA POINT DR
ROCKLEDGE, FL 32955

Current Mailing Address: New Mailing Address:

P.O. BOX 561602 ROCKLEDGE, FL 32655

FEI Number: 01-0562402 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PETRONE, JUSTIN A

946 RIVIERA POINT DR

ROCKLEDGE, FL 32955 US

PAGE, MATTHEW G

973 RIVIERA POINT DR

ROCKLEDGE, FL 32955 US

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: MATTHEW PAGE 04/25/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: PETRIZZO, MICHAEL
Address: 977 RIVIERA POINT DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: D

Name: FISHER, JOEL
Address: 965 RIVIERA POINT DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: SD

Name: PETRIZZO, BARBARA
Address: 990 RIVIERA POINT DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD

Name: PAGE, MATTHEW
Address: 973 RIVIERA POINT DR
City-St-Zip: ROCKLEDGE, FL 32955

Title:

Name: IGLESIAS, MANUEL
Address: 949 RIVIERA POINT DR.
City-St-Zip: ROCKLEDGE, FL 32955

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW PAGE TD 04/25/2012