## 2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000003553

FILED Jul 10, 2012 Secretary of State

Entity Name: SABAL POINTE AT MAJESTIC PALMS SECTION I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** 

New Principal Place of Business:

C/O INTEGRATED PROPERTY MGMT 5020 TAMIAMI TR NORTH, STE 206

6719 WINKLER RD. STE. 200 FORT MYERS, FL 33919

NAPLES, FL 34103

**Current Mailing Address:** 

New Mailing Address:

C/O INTEGRATED PROPERTY MGMT 5020 TAMIAMI TR NORTH, STE 206

C/O ALLIANT PROPERTY MANAGEMENT, LLC 6719 WINKLER RD. STE. 200 FORT MYERS, FL 33919

NAPLES, FL 34103

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

FEI Number: 56-2366073

FEI Number Applied For ( )

Name and Address of New Registered Agent:

C/O ALLIANT PROPERTY MANAGEMENT, LLC

SHIELDS, CHRISTOPHER 1833 HENDRY STREET

ALLIANT PROPERTY MANAGEMENT, LLC

6719 WINKLER RD. STE. 200 FORT MYERS, FL 33919

in the State of Florida.

FT. MYERS, FL 33902

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: JOHN M. STROHM

Name and Address of Current Registered Agent:

07/10/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ZUBECK, BRUCE Name:

Address: 11650 MARINO COURT #507 City-St-Zip: FT. MYERS, FL 33908

Title: DVP

Name: PETERS, GERALD

Address: 11631 MARINO COURT #806 City-St-Zip: FT. MYERS, FL 33908

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: BRUCE ZUBECK PD 07/10/2012