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Feb 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # N23160 (7)
1. Corporation Name
SARABAY WOODS HOMEOWNERS ASSOCIATION, INC.Principal Place of Business
P. O. BOX 1151
TALLEVAST FL 34270-1151
USMailing Address
P. O. BOX 1151
TALLEVAST FL 34270-1151
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VICTORIA B. BOTTO
7147 QUEEN PALM CIRCLE
SARASOTA FL 3424381 Name VICTORIA B. BOTTO, President
82 Street Address (P.O. Box Number is Not Acceptable)
83 N/A
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME VICTORIA B. BOTTO
STREET ADDRESS 7147 QUEEN PALM CIRCLE
CITY-ST-ZIP SARASOTA FL
☐ DELETE1.1 TITLE V/D
1.2 NAME MARY McKEOWN
1.3 STREET ADDRESS 6934 9TH COURT EAST
1.4 CITY-ST-ZIP SARASOTA, FL 34243
☐ Change ☒ AdditionTITLE SD
NAME STEVE WINFOUGH
STREET ADDRESS 7114 QUEEN PALM CIRCLE
CITY-ST-ZIP SARASOTA FL
☐ DELETE2.1 TITLE D
2.2 NAME RHONDA PIKE
2.3 STREET ADDRESS 7138 QUEEN Palm Circle
2.4 CITY-ST-ZIP SARASOTA, FL 34243
☐ Change ☒ AdditionTITLE TD
NAME MARK E. BOTTO
STREET ADDRESS 7141 QUEEN PALM CIRCLE
CITY-ST-ZIP SARASOTA FL
☐ DELETE3.1 TITLE D
3.2 NAME Debra Rinehart
3.3 STREET ADDRESS 923 Wee Burn Place
3.4 CITY-ST-ZIP Sarasota, FL 34243
☐ Change ☒ AdditionTITLE D
NAME S. DON POTTER
STREET ADDRESS 907 70TH DRIVE EAST
CITY-ST-ZIP SARASOTA FL
☒ DELETE4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ AdditionTITLE D
NAME JENNIE ELY
STREET ADDRESS 911 WEEBURN PLACE
CITY-ST-ZIP SARASOTA FL
☐ DELETE5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ AdditionTITLE D
NAME RAY COLINI
STREET ADDRESS 7132 QUEEN PALM CIRCLE
CITY-ST-ZIP SARASOTA FL
☒ DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date January 21 1997 Daytime Phone # 0084006

CR2E037 (9/96)