## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N23390

FILED Jan 12, 2004 Secretary of State

Entity Name: SABLEWOOD PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 8317 SE WOODCREST PL HOBE SOUND, FL 33455 US **Current Mailing Address: New Mailing Address:** PO BOX 8554 HOBE SOUND, FL 33475 US FEI Number: 65-0047726 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: BRAZ, MARCUS 8317 SE WOODCREST PL HOBE SOUND, FL 33455 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MARSH, RONALD Name: Name: 8454 SE WOODCREST PL Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: MASSEY, FRANCES Name: Address: 8485 SE WOODCREST PL Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition REICHKE, CHRISTI Name: REICHLE, CHRISTI Name: 8326 SE WOODCREST PL 8326 SE WOODCREST PL Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: HOBE SOUND, FL 33455 Title: ( ) Delete Title: () Change () Addition Name: BRAZ, MARCUS Name: 8317 SE WOODCREST PL Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: Title: Title: () Delete () Change () Addition HANLEY, MARGE Name: Name: 8358 SE WOODCREST PL Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRIS REICHLE T 01/12/2004