

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42226

FILED  
Mar 12, 2008  
Secretary of State

**Entity Name:** THE SARATOGA HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

32031 DEWBERRY LN  
SORRENTO, FL 32776

**New Principal Place of Business:**

32100 DEWBERRY LANE  
SORRENTO, FL 32776

**Current Mailing Address:**

32031 DEWBERRY LN  
SORRENTO, FL 32776

**New Mailing Address:**

32100 DEWBERRY LANE  
SORRENTO, FL 32776

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

DAVIS, SPENCER D  
32031 DEWBERRY LANE  
SORRENTO, FL 32776 US

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

CHUBBOY, MARSHALL A  
32100 DEWBERRY LANE  
SORRENTO, FL 32776 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: MARSHALL CHUBBOY

03/12/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DAVIS, SPENCER D  
Address: 32031 DEWBERRY LANE  
City-St-Zip: SORRENTO, FL 32776

Title: SD ( ) Delete  
Name: DALEY, JANICE  
Address: 32111 DEWBERRY LANE  
City-St-Zip: SORRENTO, FL 32776

Title: VD ( ) Delete  
Name: DAVIS, MAUREEN  
Address: 32031 DEWBERRY LANE  
City-St-Zip: SORRENTO, FL 32776

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CHUBBOY, MARSHALL A  
Address: 32100 DEWBERRY LANE  
City-St-Zip: SORRENTO, FL 32776

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: MARSHALL CHUBBOY

PD

03/12/2008

Electronic Signature of Signing Officer or Director

Date