

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000184

FILED
Jan 27, 2012
Secretary of State

Entity Name: SABAL GARDENS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5171 SABAL GARDENS LANE
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

C/O SCOTTS MANAGEMENT SERVICES, INC.
1725 S. FEDERAL HWY. STE. B-9
DELRAY BEACH, FL 33483

New Mailing Address:

C/O SCOTTS MANAGEMENT SERVICES, INC.
P. O. BOX 83-2040
DELRAY BEACH, FL 33483

FEI Number: 65-0461318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTTS MANAGEMENT SERVICES, INC
555 BANYAN TREE LN.
308
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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:

Title: PRES
Name: GOLDFARB, BARBARA S
Address: 5180-1 SABAL GARDENS LANE
City-St-Zip: BOCA RATON, FL 33487

Title: VP
Name: ALKALAY, JUDY
Address: 5160-4 SABAL GARDENS LANE
City-St-Zip: BOCA RATON, FL 33487

Title: SEC
Name: MARBLE, ADRIENNE
Address: 5160-1 SABAL GARDENS LANE
City-St-Zip: BOCA RATON, FL 33487

Title: DIR
Name: SARNATORNO, LIBBIE
Address: 5190-3 SABAL GARDENS LANE
City-St-Zip: BOCA RATON, FL 33487

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: SCOTT LYMBURNER

MGR.

01/27/2012

Electronic Signature of Signing Officer or Director

Date