

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000651

FILED
Feb 09, 2007
Secretary of State

Entity Name: SADDLEBROOK COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

2582 S. MAGUIRE RD.
#318
OCOOE, FL 34761

New Principal Place of Business:

Current Mailing Address:

2582 S. MAGUIRE RD.
#318
OCOOE, FL 34761

New Mailing Address:

PO BOX 783367
WINTER GARDEN, FL 34778

FEI Number: 59-3506018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOMON, SPENCER R
113 DESIRE AURORA ST.
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

SOLOMON, SPENCER R
14443 PRUNNING WOOD PLACE
WINTER GARDEN, FL 34787 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: SPENCER SOLOMON

02/09/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARTLEY, BOB
Address: 3545 FURLONG WAY
City-St-Zip: GOTH, FL 34734

Title: STD () Delete
Name: COMMERFORD, DICK
Address: 3345 FURLONG WAY
City-St-Zip: GOTH, FL 34734

Title: D () Delete
Name: GAVULIC, STEVE
Address: 3718 WINNERS CUP CIRCLE
City-St-Zip: GOTH, FL 34734

Title: VPD () Delete
Name: LENCESKI, JANICE
Address: 3304 FURLONG WAY
City-St-Zip: GOTH, FL 34734

Title: D () Delete
Name: BUTTERBAUGH, PATRICIA
Address: 3313 ROYL ASCOT WAY
City-St-Zip: GOTH, FL 34734

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SPACKMAN, JEFFREY
Address: 3545 FURLONG WAY
City-St-Zip: GOTH, FL 34734

Title: VPD (X) Change () Addition
Name: GAVULIC, STEVE
Address: 3718 WINNERS CUP CT
City-St-Zip: GOTH, FL 34734

Title: SD (X) Change () Addition
Name: OTTO, LISA
Address: 3607 POMPANO
City-St-Zip: GOTH, FL 34734

Title: TD (X) Change () Addition
Name: BUTTERBAUGH, PATRICIA
Address: 3313 ROYL ASCOT WAY
City-St-Zip: GOTH, FL 34734

Title: D (X) Change () Addition
Name: SWISHER, LINDA
Address: 3362 FURLONG WAY
City-St-Zip: GOTH, FL 34734

I hereby certify that the information supplied with this filing does not qualify for the 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: SPENCER SOLOMON

RA

02/09/2007

Electronic Signature of Signing Officer or Director

Date