#### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 737723** 

Entity Name: SLEEPY LAGOON PROPERTY OWNERS, INC.

FILED
Jan 30, 2013
Secretary of State
CC5802428254

# **Current Principal Place of Business:**

413 RED SAIL WAY

SATELLITE BEACH. FL 32937

## **Current Mailing Address:**

PO BOX 372524

SATELLITE BEACH, FL 32937

FEI Number: 59-1743608 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BAULIG, WILLIAM M 413 RED SAIL WAY SATELLITE BEACH, FL 32937 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

#### Officer/Director Detail:

Title P Title

NameGREENBERG, LYNN MSNameBAULIG, WILLIAM MAddress424 RED SAIL WAYAddress413 RED SAIL WAY

City-State-Zip: SATELLITE BEACH FL 32937 City-State-Zip: SATELLITE BEACH FL 32937

Title VP Title S

NameSCOTT, MEGNameMORRIS, DONNAAddress416 RED SAIL WAYAddress465 RED SAIL WAY

City-State-Zip: SATELLITE BEACH FL 32937 City-State-Zip: SATELLITE BEACH FL 32937

Title DIR

Name PEEDE, BUDDY Address 441 RED SAIL WAY

City-State-Zip: SATELLITE BEACH FL 32937

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: WILLIAM BAULIG TREASURER

JRER 01/30/2013

Date

Electronic Signature of Signing Officer/Director Detail