

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001703

Entity Name: SADDLEBROOKE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**928 E NEW HAVEN AVE
MELBOURNE, FL 32901**Current Mailing Address:**928 E NEW HAVEN AVE
MELBOURNE, FL 32901 US**FEI Number:** 59-3634456**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SPACE COAST PROPERTY MANAGEMENT OF BREVARD
928 E NEW HAVEN AVE
MELBOURNE, FL 32901 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 DIRECTOR
Name RUSSELL, HENRY
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title PRES
Name KOECHLEIN, PHILLIP
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title TREA
Name RODRIGUEZ, CHRYSTAL
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title VP
Name HAY, TOM
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title DAL
Name WADE, JAMES
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title DAL
Name PATALA, RAY
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name BAUER, JOHN
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title SECRETARY
Name WHEATON, HAROLD
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Continues on page 2

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: CHRYSTAL RODRIGUEZ**TREASURER****02/28/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DAL
Name	OHARA, TONY
Address	928 E NEW HAVEN AVE
City-State-Zip:	MELBOURNE FL 32901