

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011461

Entity Name: SAWGRASS VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6972 LAKE GLORIA BLVD
ORLANDO, FL 32809

Current Mailing Address:

6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US

FEI Number: 20-2708935

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LELAND MGMT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 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 PRESIDENT
Name GERICKE, FRED
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title SECRETARY
Name O'SHEA, JOHN L
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name ROMOLA, DENISE
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name FORDE, DWIGHT
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLAND FL 32809

Title T
Name PEREZ, FRANK
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title VP
Name MEYERS, JEROME
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name LEE, THOMAS
Address 6972 LAKE GLORIA BLVD
City-State-Zip: ORLANDO FL 32809

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: FRED GERICKE

PRESIDENT

04/18/2017

Electronic Signature of Signing Officer/Director Detail

Date