•	-	<i>.</i>	CC254	4257946
Current Mai	iling Address:			
P.O. BOX 13 ST. AUGUS	389 TINE, FL 32085 US			
FEI Number: 47-1852717		Certificate of Status Desired: No		
Name and A	Address of Current Registered Agent:			
77 ALMERIA S	ERTY MANAGEMENT LLC T JE, FL 32084 US			
The above name	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of F	lorida.
	d entity submits this statement for the purpose of changing its regi E: JANEEN L RAULERSON	stered office or regis	tered agent, or both, in the State of F	ilorida. 01/16/2017
		stered office or regis	tered agent, or both, in the State of F	
SIGNATUR	E: JANEEN L RAULERSON	istered office or regis	stered agent, or both, in the State of F	01/16/2017
SIGNATUR	E: JANEEN L RAULERSON Electronic Signature of Registered Agent	istered office or regis	tered agent, or both, in the State of F	01/16/2017
SIGNATURI Officer/Dire	E: JANEEN L RAULERSON Electronic Signature of Registered Agent			01/16/2017
SIGNATUR	E: JANEEN L RAULERSON Electronic Signature of Registered Agent Ctor Detail : DV	Title	DP	01/16/2017
SIGNATURE Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : DV ZAKOSKE, JOHN E 4220 RACE TRACK ROAD	Title Name	DP DEARING, MARK C 4220 RACE TRACK ROAD	01/16/2017
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : DV ZAKOSKE, JOHN E 4220 RACE TRACK ROAD	Title Name Address	DP DEARING, MARK C 4220 RACE TRACK ROAD	01/16/2017
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	E: JANEEN L RAULERSON Electronic Signature of Registered Agent OV ZAKOSKE, JOHN E 4220 RACE TRACK ROAD ST. JOHNS FL 32259	Title Name Address	DP DEARING, MARK C 4220 RACE TRACK ROAD	01/16/2017
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : DV ZAKOSKE, JOHN E 4220 RACE TRACK ROAD ST. JOHNS FL 32259 DST	Title Name Address	DP DEARING, MARK C 4220 RACE TRACK ROAD	01/16/2017

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.

DP

SIGNATURE: MARK C DEARING

Electronic Signature of Signing Officer/Director Detail

Entity Name: SAN SALITO OWNERS ASSOCIATION, INC

DOCUMENT# N1400008042

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

01/16/2017

Date

FILED Jan 16, 2017 **Secretary of State**