

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003644

FILED
Apr 16, 2024
Secretary of State
1223361704CC

Entity Name: SABAL LAKES PHASE TWO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALLIED PROPERTY MANAGEMENT GRP, INC.
1711 WORTHINGTON ROAD, STE 103
WEST PALM BEACH, FL 33409

Current Mailing Address:

C/O ALLIED PROPERTY MANAGEMENT GRP, INC.
1711 WORTHINGTON ROAD, STE 103
WEST PALM BEACH, FL 33409 US

FEI Number: 65-0474038

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BACKER, ABOUD, POLIAKOFF & FOELSTER
400 S. DIXIE HIGHWAY
THE ARBOR, SUITE 420
BOCA RATON, FL 33432 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: RYAN ABOUND

04/16/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name EMM, GERALD
Address C/O ALLIED PROPERTY
 MANAGEMENT GRP, INC.
 1711 WORTHINGTON ROAD, STE 103

City-State-Zip: WEST PALM BEACH FL 33409

Title PRESIDENT
Name KNOWLES, MICHAEL
Address C/O ALLIED PROPERTY
 MANAGEMENT GRP, INC.
 1711 WORTHINGTON ROAD, STE 103

City-State-Zip: WEST PALM BEACH FL 33409

Title VP
Name MARGOLIS, JESSE B JR.
Address C/O ALLIED PROPERTY
 MANAGEMENT GRP, INC.
 1711 WORTHINGTON ROAD, STE 103

City-State-Zip: WEST PALM BEACH FL 33409

Title TREASURER
Name ROEGIERS, SUSAN
Address C/O ALLIED PROPERTY
 MANAGEMENT GRP, INC.
 1711 WORTHINGTON ROAD, STE 103

City-State-Zip: WEST PALM BEACH FL 33409

Title SECRETARY
Name MEYER, DARYL
Address C/O ALLIED PROPERTY
 MANAGEMENT GRP, INC.
 1711 WORTHINGTON ROAD, STE 103

City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR
Name ORFANOS, CHRISTINA
Address C/O ALLIED PROPERTY
 MANAGEMENT GRP, INC.
 1711 WORTHINGTON ROAD, STE 103

City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR
Name DUBBERLY, CHRISTOPHER
Address C/O ALLIED PROPERTY
 MANAGEMENT GRP, INC.
 1711 WORTHINGTON ROAD, STE 103

City-State-Zip: WEST PALM BEACH FL 33409

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 on the return.

SIGNATURE: MICHAEL KNOWLES

PRESIDENT

04/16/2024

Electronic Signature of Signing Officer/Director Detail

Date