Sabal Trace HOA, Inc.

C/O Watson Association Management 430 NW Lake Whitney Place, Port St. Lucie, FL 34986 $772-871-0004 \sim 772-871-0005 \text{ FAX}$ paminfo@Watsonrealtycorp.com

OWNER INFORMATION SHEET

In order to keep our records c	urrent we are asking that you pro	vide us with the current information.
OWNER(S) NAME:		
PROPERTY ADDRESS:		
TENANT NAME (if any):		
LEASE DATES	TO	<u> </u>
AWAY ADDRESS:		
CURRENT MAILING ADDRE	SS: PROPERTY ADDRESS	□ AWAY ADDRESS
LOCAL PHONE NUMBER:	AWAY PHONE	NUMBER:
either calling us at 772-871-0004	or by going to the Watson	ou want us to change your mailing address by Association Management web site at Sabal Trace Homeowners Association, Inc.",
completing, signing, and returning this Watson Association Management to ser	form, you are authorizing the Boar nd you agendas of upcoming meetin	owners without their written consents. By d of Directors of the Sabal Trace HOA and ags; reports on actions taken by the Board at not be used for any other purpose than those
Sabal Trace HOA.	out the developments and issues rega	arding your investment as an owner in the
Yes ☐ I authorize Sabal Trace notices, agendas, reports		ciation to email me appropriate meeting
Email Address:		
Phone Number(s):		
Signature(s):		
Printed Name(s):		
No ☐ I do not want to receive	emails from Sabal Trace HOA and V	Vatson Association Management.