2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jul 28, 2006 8:00 am
Secretary of State
06-20-2006 90012 050 ****61.25

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1. Entity Name
SAVANNA BAY CONDOMINIUMS, INC.

Principal Place of Business	Mailing Address
847 4TH AVENUE SOUTH NAPLES, FL 34102	847 4TH AVENUE SOUTH NAPLES, FL 34102

660226000

05082006 Chg-NP CR2E037 (4/06)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	100 Sullivan ST Suite, Apt. #, etc. 112
City & State	City & State Punta Gorda FL
Zip / Country	Zip 33950 / Country US

4. FEI Number 99-0188825 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WOOD, DOUGLAS A 1000 TAMIAMI TRAIL NORTH, STE 201 NAPLES, FL 34102	Name JOAN F. GREENE Street Address (P.O. Box Number is Not Acceptable) 100 SULLIVAN STREET Ste 112 City PUNTA GORDA FL Zip Code 33950

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Joan F Greene 5/31/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST CABRAL, TIM 692 PINE CT NAPLES, FL 34102	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT D JUDY SCHALL 619 MADRID PUNTA GORDA FL 33950	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV PADLO, LARRY 953 18 AVE SOUTH NAPLES, FL 34102	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURE D DAVID SCHALL 619 MADRID BLVD PUNTA GORDA FL 33950	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOERFLER, JENNIFER 11791 BRADLEY COURT BONITA SPRINGS, FL 34135	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP MARILEE STRAZA 12246 CHAMPIONSHIP CIRCLE FT. MYERS, FL 33913	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Judy B Schall JUDY B. SCHALL 5/31/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #