

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003482

FILED
Apr 10, 2009
Secretary of State

Entity Name: SAVANNAH CROSSING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3968 NORTH MONROE STREET
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 US

Current Mailing Address:

3968 NORTH MONROE STREET
TALLAHASSEE, FL 32303 US

New Mailing Address:

P.O. BOX 13089
TALLAHASSEE, FL 32317 US

FEI Number: 58-2673774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SBORDONE, LEANN
HOMEOWNERS ASSOCIATION SERVICES
3968 NORTH MONROE STREET
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

RHINEHART, ROBERT S CAM
644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 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: ROBERT S. RHINEHART

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PLESCOW, JOHN
Address: 1504 BELMONT TRACE
City-St-Zip: TALLAHASSEE, FL 32301

Title: V () Delete
Name: TIRPAK, DOUG
Address: 6070 BIRCH TREE TERRACE
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: CONFORTI, CHERYL
Address: 10843 158TH STRET N
City-St-Zip: JUPITER, FL 33478

Title: S () Delete
Name: WALKER, ASHLEY
Address: 2738 W. THARPE ST #2701
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: OKOLI, OKENWA
Address: 4743 PLANTERS RIDGE DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: MACWHIRTER, GLEN
Address: 724 CHESTERTOWN STREET
City-St-Zip: GAITHERSBURG, MD 20878

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: HOWARD, CRAIG
Address: 8416 MAHAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: S (X) Change () Addition
Name: ANDERSON, ASHLEY
Address: 2738 W. THARPE ST #2701
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT S. RHINEHART

RA

04/10/2009

Electronic Signature of Signing Officer or Director

Date