### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003482

Entity Name: SAVANNAH CROSSING CONDOMINIUM ASSOCIATION, INC.

**FILED** Mar 24, 2017 **Secretary of State** CC2990366585

# **Current Principal Place of Business:**

644 CAPITAL CIRCLE NE TALLAHASSEE, FL 32301

### **Current Mailing Address:**

P.O. BOX 13089

TALLAHASSEE. FL 32317 US

FEI Number: 58-2673774 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

RHINEHART, ROBERT S 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.

City-State-Zip:

SIGNATURE: ROBERT S RHINEHART

03/24/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail :

City-State-Zip: TALLAHASSEE FL 32301

Title	P	Title	SECRETARY
Name	PLESCOW, JOHN	Name	MARR, MARY
Address	644 CAPITAL CIRCLE NE	Address	644 CAPITAL CIRCLE NE

Title MANAGER/AGENT Title **TREASURER** Name RHINEHART, ROBERT S Name HOWARD, CRAIG

Address P.O. BOX 13089 Address 644 CAPITAL CIRCLE NE

TALLAHASSEE FL 32317 City-State-Zip: City-State-Zip: TALLAHASSEE FL 32301

DIRECTOR Title Title

Name CARLISLE, DIANE CONFORTI, CHERYL Name

Address 644 CAPITAL CIRCLE NE Address 644 CAPITAL CIRCLE NE City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301

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.

SIGNATURE: ROBERT S RHINEHART

REGISTERED AGENT

TALLAHASSEE FL 32301

03/24/2017