

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000001099

**Entity Name:** SANTA ROSA GOLF VILLAS OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 26, 2013**  
**Secretary of State**  
**CC8718564749**

**Current Principal Place of Business:**

5311 E CO HWY 30A  
STE 3  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

5311 E CO HWY 30A  
STE 3  
SANTA ROSA BEACH, FL 32459

**FEI Number: 20-5347685**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PRITCHETT, WALTER R  
5311 E CO HWY 30A  
STE 3  
SANTA ROSA BEACH, FL 32459 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D P  
Name JACOBSON, DAVE  
Address 5311 E CO HWY 30-A, STE 3  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title D V  
Name BAIRD, ROBERT  
Address 5311 E CO HWY 30-A, STE 3  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title D, S  
Name KNIGHT, TRENTON  
Address 5311 E CO HWY 30-A STE 3  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title D T  
Name DRUGGER, DAVIS  
Address 5311 E CO HWY 30-A, STE 3  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title D  
Name LEAHY, JOHN  
Address 5311 E CO HWY 30A  
STE 3  
City-State-Zip: SANTA ROSA BEACH FL 32459

*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: DAVE JACOBSON**

**P**

**04/26/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date