

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00498

FILED
Apr 15, 2009
Secretary of State

Entity Name: THE SAVANNAS CLUB ASSOCIATION, INC.

Current Principal Place of Business:

2027 NE COLLINS CIRCLE
JENSEN BEACH, FL 349575423

New Principal Place of Business:

Current Mailing Address:

2027 NE COLLINS CIRCLE
JENSEN BEACH, FL 349575423

New Mailing Address:

FEI Number: 59-2434347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAKAB, JOSEPH
C/O JAKAB MANAGEMENT SERVICE
666 NE DIXIE HWY
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

INGLIS, STEVE
C/O BRISTOL PROPERTY MANAGEMENT
543 NW LAKE WHITENY PL., SUITE 101
PORT ST. LUCIE, FL 34986 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: STEVE INGLIS

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: SHIPPMAN, PATRICIA
Address: 1957 NE COLLINS CIR 14-40
City-St-Zip: JENSEN BEACH, FL 34957

Title: VPD () Delete
Name: BENTON, ELLEN
Address: 2055 NE COLLINS CIR #6-70
City-St-Zip: JENSEN BCH, FL 34957

Title: D () Delete
Name: MCDERMOTT, BRIAN
Address: 2041 NE COLLINS CIR S
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD () Delete
Name: SHIPMAN, RONALD
Address: 1957 NE COLLINS CIR 14-40
City-St-Zip: JENSEN BEACH, FL 34957

Title: TD () Delete
Name: DUVO, DONALD
Address: 2041 NE COLLINS CIR 5-110
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: DONALD DUVO

TREA

04/15/2009

Electronic Signature of Signing Officer or Director

Date