2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2010
Secretary of State

DOCUMENT# N03000004683

Entity Name: THE SAVOY ON PALM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

401 S. PALM AVE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

595 BAY ISLES ROAD
SUITE 200
LONGBOAT KEY, FL 34228 US

New Mailing Address:

FEI Number: 20-3983649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BETH COLLANS MGMT CORP
595 BAY ISLES RD. SUITE 200
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: GROSS, LYNNE
Address: 401 S. PALM AVENUE, UNIT 701
City-St-Zip: SARASOTA, FL 34236 US

Title: VPSD
Name: LINDEMAN, NANCY
Address: 401 S. PALM AVENUE, UNIT 903
City-St-Zip: SARASOTA, FL 34236 US

Title: D
Name: SIEGEL, MORT
Address: 401 S. PALM AVENUE, UNIT 1003
City-St-Zip: SARASOTA, FL 34236 US

Title: D
Name: RUBEN, WAYNE
Address: 401 S. PALM AVENUE, UNIT 1001
City-St-Zip: SARASOTA, FL 34236 US

Title: TD
Name: ROE, BILL
Address: 401 S. PALM AVENUE, UNIT 602
City-St-Zip: SARASOTA, FL 34236 US

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: LYNNE GROSS PRES 02/15/2010

Electronic Signature of Signing Officer or Director Date