2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 23, 2007 08:00 Al Secretary of State

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1. Entity Name

SAVÁNNAH PRESERVE AT UNIVERSITY PLACE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

ONE SOUTH SCHOOL AVE., SUITE 500 SARASOTA, FL 34237

ONE SOUTH SCHOOL AVE., SUITE 500 SARASOTA, FL 34237



01112007 No Chg-NP

CR2E037 (4/06)

4. FEI Number		Applied For
NOT APPLICABLE		Not Applicable
5. Certificate of Status Desired	\$8.75 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

BRADLEY, SCOTT ONE SOUTH SCHOOL AVE., SUITE 500 SARASOTA, FL 34237

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8. 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. I am familiar with, and accept the obligations of registered agent.									
Signature: typed or printed name of registered agent and bite if applicable. (NOTE: Registered Agent signature required when reinstating) OATE									
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRADLEY, SCOTT ONE SOUTH SCHOOL AVE., SUITE 5 SARASOTA, FL 34237	500			U00000725027				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLEHUE, RONDA ONE SOUTH SCHOOL AVE., SUITE 5 SARASOTA, FL 34237	500			05/03/07-80005-024 61.2				
TITLE D NAME BAGWELL, LISA STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34237			DO NOT WRITE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME		, ,,,							
STREET ADDRESS CITY-ST-ZIP									
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									