

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005371

FILED  
Feb 18, 2008  
Secretary of State

**Entity Name:** SAVANNAH PINES CONDOMINIUM, INC.

**Current Principal Place of Business:**

5955 T.G. LEE BLVD., STE. 300  
ORLANDO, FL 328224457 US

**New Principal Place of Business:**

**Current Mailing Address:**

5955 T.G. LEE BLVD., STE. 300  
ORLANDO, FL 328224457 US

**New Mailing Address:**

**FEI Number:** 20-2904450

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FURLOW, REBECCA  
5955 T.G. LEE BLVD., STE. 300  
ORLANDO, FL 328224457 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: P ( ) Delete  
Name: MORENCY, MARC  
Address: 9310 FLOWERING COTTONWOOD RD  
City-St-Zip: ORLANDO, FL 32832 US

Title: S/T ( ) Delete  
Name: ALI, RAVI  
Address: 10746 SAVANNAH WOOD COURT  
City-St-Zip: ORLANDO, FL 32832 US

Title: VP ( ) Delete  
Name: SIPKA, DREW  
Address: 9358 FLOWERING COTTONWOOD ROAD  
City-St-Zip: ORLANDO, FL 32832 US

**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:

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: REBECCA FURLOW

RA

02/18/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date