2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 13, 2009
Secretary of State

DOCUMENT# N05000005834

Entity Name: SAVANNAH AT RIVERSIDE CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

881 RIVERSIDE DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

881 RIVERSIDE DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 51-0546089 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPLAN, LOU
C/O SACHS & SAX
301 YAMATO RD, STE 4150
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

ASSOCIATED CORPORATE SERVICES, LLC
C/O LOUIS CAPLAN, ESQ.
6111 BROKEN SOUND PARKWAY NW, STE.200
BOCA RATON, FL 33487 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: LOUIS CAPLAN 10/13/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KRONENBERG, MORTON
Address: 140 NE 28AVE #509
City-St-Zip: POMPANO BEACH, FL 33062

Title: VP (X) Delete
Name: GUELTZOW, GARY A
Address: 5610 SW 9 ST
City-St-Zip: PLANTATION, FL 33317

Title: STD (X) Delete
Name: CHATOMAL, HARESH
Address: 934 UNIVERSITY DR #444
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: REGULA, JAYADEV
Address: 733 RIVERSIDE DRIVE #1232
City-St-Zip: CORAL SPRINGS, FL 33071

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: JAYADEV REGULA PD 10/13/2009
Electronic Signature of Signing Officer or Director Date