2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2009
Secretary of State

DOCUMENT# N06000007833

Entity Name: SAVANNAH RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

310 ALMOND STREET
CLERMONT, FL 34711

New Principal Place of Business:

300 EAST DIVISION STREET
MINNEOLA, FL 34715

Current Mailing Address:

310 ALMOND STREET
CLERMONT, FL 34711

New Mailing Address:

P.O. BOX 120-978
CLERMONT, FL 34712

FEI Number: 41-2241797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOGAN, ROBERT K
310 ALMOND STREET
CLERMONT, FL 34711 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: D ( ) Delete
Name: GEY, WAYNE H
Address: 310 ALMOND STREET
City-St-Zip: CLERMONT, FL 34711

Title: DP ( ) Delete
Name: HOGAN, ROBERT K
Address: 310 ALMOND STREET
City-St-Zip: CLERMONT, FL 34711

Title: DV ( ) Delete
Name: KOCIELKO, JEROME
Address: 310 ALMOND STREET
City-St-Zip: CLERMONT, FL 34711

Title: ST ( ) Delete
Name: KOCIELKO, BONITA
Address: 310 ALMOND STREET
City-St-Zip: CLERMONT, FL 34711

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:

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: ROBERT K HOGAN DP 07/22/2009
Electronic Signature of Signing Officer or Director — Date