

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011585

FILED  
Apr 11, 2012  
Secretary of State

**Entity Name:** SAVANNAH POINTE AT VENETIAN BAY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

424 LUNA BELLA LANE  
SUITE 135-1  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

424 LUNA BELLA LANE  
SUITE 135-1  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

**FEI Number:** 20-8200838

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREEN, GAIL  
6093 SABAL BROOK WAY  
PORT ORANGE, FL 32128 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/D  
Name: HAASE, DEBORAH  
Address: 3323 TORRE BLVD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S/D  
Name: BABER, DWIGHT  
Address: 3408 TORRE BLVD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T/D  
Name: SMITH, CHARLES JR.  
Address: 3425 TORRE BLVD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VP/D  
Name: EVANS, MARY  
Address: 3396 TORRE BLVD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: DEBORAH HAASE

P/D

04/11/2012

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

\_\_\_\_\_  
Date