

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001503

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** SAVANNAH PARK MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

2450 MAITLAND CENTER PKWY.,SUITE 301  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

2450 MAITLAND CENTER PKWY.,SUITE 301  
MAITLAND, FL 32751

**New Mailing Address:**

**FEI Number:** 26-2263045

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPDIRECT AGENTS, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES ( ) Change (X) Addition  
Name: RENY, JOHN P  
Address: 2450 MAITLAND CENTER PARKWAY, 301  
City-St-Zip: MAITLAND, FL 32751

Title: VP ( ) Change (X) Addition  
Name: KOLEOS, DAVID J  
Address: 1000 OLD ROSWELL LAKES PKWY, 310  
City-St-Zip: ROSWELL, GA 30076

Title: S ( ) Change (X) Addition  
Name: GEHRHARDT, MARY G  
Address: 2450 MAITLAND CENTER PKWY, 301  
City-St-Zip: MAITLAND, FL 32751

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: MARY GEHRHARDT

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04/14/2009

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

\_\_\_\_\_  
Date