

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N11809 1. Entity Name SAVANNAH CONDOMINIUM ASSOCIATION, INC.																																																																																															
Principal Place of Business C/O INFINITI PROPERTY MANAGEMENT, INC 1301 SEMINOLE BLVD., STE. 110 LARGO FL 33770 US		Mailing Address C/O INFINITI PROPERTY MANAGEMENT, INC 1301 SEMINOLE BLVD., STE. 110 LARGO FL 33770 US																																																																																													
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																																																																																													
4. FEI Number 59-2247251		Applied For ☐ Not Applied																																																																																													
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																																																																																													
6. Name and Address of Current Registered Agent INFINITI PROPERTY MANAGEMENT INC. 1301 SEMINOLE BLVD #110 LARGO FL 33770			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																												
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																															
SIGNATURE _____ (NOTE: Registered Agent signature required when renouncing) DATE _____																																																																																															
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees																																																																																											
Make Check Payable to Florida Department of State																																																																																															
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">D ANDERSON, ARNOLD</td> <td style="width: 10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">7907 SAILBOAT KEY BLVD #108</td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2">SOUTH PASADENA FL 33707</td> </tr> <tr> <td>TITLE</td> <td>VD INGRAHAM, ALDEN</td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">7907 SAILBOAT KEY BLVD. #407</td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2">SO. PASADENA FL</td> </tr> <tr> <td>TITLE</td> <td>SD QUAYLE, BARBARA</td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">7907 SAILBOAT KEY BLVD., #105</td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2">S. PASADENA FL 33707</td> </tr> <tr> <td>TITLE</td> <td>PD LEACH, STUART</td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">7907 SAILBOAT KEY BLVD #205</td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2">SOUTH PASADENA FL 33707</td> </tr> <tr> <td>TITLE</td> <td>TD DELONG, HOWARD</td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">7903 SAILBOAT KEY BLVD., #206</td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2">SOUTH PASADENA FL 33707</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">000000465197</td> <td style="width: 10%; text-align: center;">☐ Change ☐ Add</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">03/22/06-80027-004 61.25</td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Add</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Add</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Add</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> </table>						TITLE	D ANDERSON, ARNOLD	☐ Delete	STREET ADDRESS	7907 SAILBOAT KEY BLVD #108		CITY- ST- ZIP	SOUTH PASADENA FL 33707		TITLE	VD INGRAHAM, ALDEN	☐ Delete	STREET ADDRESS	7907 SAILBOAT KEY BLVD. #407		CITY- ST- ZIP	SO. PASADENA FL		TITLE	SD QUAYLE, BARBARA	☐ Delete	STREET ADDRESS	7907 SAILBOAT KEY BLVD., #105		CITY- ST- ZIP	S. PASADENA FL 33707		TITLE	PD LEACH, STUART	☐ Delete	STREET ADDRESS	7907 SAILBOAT KEY BLVD #205		CITY- ST- ZIP	SOUTH PASADENA FL 33707		TITLE	TD DELONG, HOWARD	☐ Delete	STREET ADDRESS	7903 SAILBOAT KEY BLVD., #206		CITY- ST- ZIP	SOUTH PASADENA FL 33707		TITLE		☐ Delete	STREET ADDRESS			CITY- ST- ZIP			TITLE	000000465197	☐ Change ☐ Add	STREET ADDRESS	03/22/06-80027-004 61.25		CITY- ST- ZIP			TITLE		☐ Change ☐ Add	STREET ADDRESS			CITY- ST- ZIP			TITLE		☐ Change ☐ Add	STREET ADDRESS			CITY- ST- ZIP			TITLE		☐ Change ☐ Add	STREET ADDRESS			CITY- ST- ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barbara D. Leach* *Barbara D. Leach* 3/9/06 (727) 360-0365