2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35744

FILED Apr 06, 2011 Secretary of State

Entity Name: THE FALLS AT SAWGRASS VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

ASSOCIATION MANAGEMENT OF PONTE VEDRA 3108 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082

Current Mailing Address: New Mailing Address:

ASSOCIATION MANAGEMENT OF PONTE VEDRA 3108 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082

FEI Number: 59-3033952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ASSOCIATION MANAGEMENT OF PONTE VEDRA 3108 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082 US CONNOLLY, C. P. ASSOCIATION MANAGEMENT OF POINT VEDRA, INC 3108 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082 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: C. P. CONNOLLY 04/06/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

itle: DVP

Name: WHEAT, CAROLYN
Address: 144 N. ROSCOE BLVD
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: STD

Name: HARTFORD, JOHN

Address: 3202 SAWGRASS VILLAGE CIRCLE City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DP

Name: HANA, RICHARD

Address: 3207 SAWGRASS VILLAGE CIRCLE City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: RICHARD HANA PD 04/06/2011